




COUNTY BOROUGH OF TYNEMOUTH

SEVENTY-SECOND
ANNUAL REPORT
OF THE
Medical Officer of Health
1952.

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SEVENTY-SECOND
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1952.

County Borough of Tynemouth

HEALTH COMMITTEE.

January to April, 1952.

THE MAYOR—Councillor T. A. M. HAILS.

Chairman :

Councillor W. LITTLE.

Deputy Chairman :

Councillor Mrs. A. SOUTHWORTH.

Members :

Alderman FORSYTH, J.P.	Councillor PARK.
Councillor CHEYNE.	„ RICHARDSON.
„ COE.	„ SMITH.
„ HEARN.	„ VELLA.
„ KITWOOD, Mrs. N.	

May to December, 1952.

THE MAYOR—Councillor T. W. CRAWSHAW.

Chairman :

Councillor Mrs. A. SOUTHWORTH.

Deputy Chairman :

Councillor W. LITTLE.

Members :

Alderman FORSYTH, J.P.	Councillor KITWOOD, Mrs. N.
Councillor BALLARD, Mrs. S. A.	„ PARK.
„ COE.	„ RICHARDSON.
„ CURRAN.	„ SMITH.
„ JOHNSON.	„ SOWERBY.

R. H. DAWSON, M.B., Ch.B., D.P.H. (Edinburgh).

**Medical Officer of Health, and
Chief Medical Officer to the Education Authority.**

STAFF OF THE
PUBLIC HEALTH DEPARTMENT.

—:O:—

MEDICAL AND DENTAL STAFF

Medical Officer of Health :	R. H. DAWSON, M.B., Ch.B., D.P.H.
Assistant Medical Officer of Health :	MARGARET B. STEEL, M.B., Ch.B., D.P.H.
Part-time Assistant Medical Officers :	ELSPETH C. SPENCER, M.B., B.S. (resigned 9/10/52).
	A. E. WHITE, M.B., B.S.
Dental Officer :	R. W. ESSENHIGH, L.D.S.

CLERICAL STAFF

Chief Clerk :	W. R. MILLER.
Senior Clerk :	G. G. ELLIS.
Clerks :	B. O. BLAGBURN.
	A. LOGAN, A.C.C.S.
	Miss M. I. K. THOMPSON.
Senior Typist :	Miss M. LAMBERT.
Typists :	Miss J. BLACK.
	Miss A. RUMMLOW.

SANITARY INSPECTION STAFF

Senior Sanitary Inspector :	C. A. MURRAY, Cert. S.I.B., Cert. Meat Inspection.
Deputy Senior Sanitary Inspector :	J. E. HALL, Cert. R.S.I., Cert. Meat Inspection
Sanitary Inspectors :	L. MORALEE, Cert. S.I.B., Cert Meat Inspection.
	R. C. NICHOLSON, Cert. S.I.B., Cert. Meat Inspection.
	W. C. W. VALENTINE, Cert. S.I.B., Cert. Meat Inspection.
	A. GILPIN, Cert. S.I.B., Cert. Meat Inspection (commenced 1/3/52).
Disinfectors :	B. NEWHAM.

NURSING STAFF

Superintendent Nursing Officer :	A. M. TURNER, S.R.N., R.F.N., S.C.M., H.V. Cert. (Q.N.).
Health Visitors :	E. MARSHALL, S.R.N., S.C.M., H.V. Cert.
	M. BATEY, S.R.N., S.C.M., H.V. Cert.
	A. I. MOONEY, S.R.N., S.R.F.N., S.C.M., H.V. Cert.
	C. L. KYLES (retired 17/2/52).
	H. MARCH, S.R.N.
	E. MYERS, S.R.N., S.C.M., H.V. Cert.
	E. SMART, S.R.N., S.R.F.N., S.C.M., H.V. Cert.
	L. HARRISON, S.R.N., S.C.M., H.V. Cert.
	M. A. WIGHT, S.R.N., S.C.M., H.V. Cert.
	K. I. M. HODGSON, S.R.N., S.C.M., H.V. Cert.
	A. TINDLE, S.R.N., S.C.M.
	M. E. MADDEN S.R.N., S.R.C.N., S.C.M. (Part 1), H.V. Cert.) (commenced 1/3/52).

STAFF OF THE PUBLIC HEALTH DEPARTMENT—*cont.*

Municipal Midwives :

M. HALL, S.R.N., S.C.M.
M. CARRUTHERS, S.C.M.
E. MOONEY, S.C.M.
A. BROWN, S.C.M.
E. BUXTON, S.R.N., S.R.F.N., S.C.M., (Q.N.).
E. BRIGGS, S.E.A.N., S.C.M.
E. SIMPSON S.C.M. (commenced 3/4/52).

District Nurses :

J. A. WAKE, S.R.N., S.C.M.
M. RICHMOND, S.R.N.
M. LOGGAN, S.R.N., S.C.M., S.R.F.N.
C. THOMSON, S.R.N.
A. ROWLEY, S.E.A.N.
M. DIXON, S.E.A.N.
E. H. THOMAS, S.E.A.N.
M. W. TIMNEY, S.E.A.N.

LUNACY AND MENTAL TREATMENT—DULY AUTHORISED OFFICERS

B. O. BLAGBURN.
A. LOGAN, A.C.C.S.
W. R. MILLER.

LOVAINE DAY NURSERY

Matron :

E. HAWKES, S.R.N., S.R.F.N.

PUBLIC ANALYST

W. GORDON CAREY, F.R.I.C.

PUBLIC HEALTH DEPARTMENT,
TYNEMOUTH

September, 1953.

*To the Mayor, Aldermen and Councillors of the
County Borough of Tynemouth.*

YOUR WORSHIP, LADIES AND GENTLEMEN,

I have the honour to submit my Annual Report for the year 1952, which has been compiled in accordance with the requirements of the Minister of Health, and which includes, at his request, a survey of the Local Health Services of the County Borough of Tynemouth administered under the provisions of the National Health Service Acts. This has been incorporated as an appendix to the report.

Data relating to the existing sanitary conditions of the Borough, and the state of health of the community, are set out in the general body of the report, but there are certain matters to which I would particularly like to draw your attention.

The figure relating to deaths from all causes, which showed an appreciable decrease in the previous year, again indicates a further considerable reduction. The death rate per thousand of the population for the year 1951 was 12.44, whilst that for the year under review was 11.56. It is gratifying that the marked decrease in the number of deaths resulting from tuberculosis, which was noted in the Annual Report for 1951, has been maintained. Unfortunately, the reduced incidence of death from cancer, which was reported to you last year, has, as was anticipated, not been maintained.

The number of live births assignable to the Borough in 1952 was 1,222 as compared with 1,228 in 1951.

The number of deaths occurring in infants under the age of one year remain at a disappointingly high level. Prematurity, together with respiratory infections, were the principal causes of death in this category.

The incidence of the commoner infectious diseases was comparatively low, and no deaths were attributed to them.

Once more, I have to express my sincere thanks to the officers and other members of the staff of the Public Health Department for the efficiency and enthusiasm they have displayed in the execution of their duties during the year.

I have also to acknowledge again the assistance which has been readily given by my colleagues in other Corporation departments in furnishing data for inclusion in this report.

To the Chairman and members of the Health Committee, and the members of the Council, I desire to tender my thanks for their support and consideration and also for the interest which they have demonstrated in the work of the Department during the year.

I have the honour to remain,

Your obedient Servant,

R. H. DAWSON,

Medical Officer of Health.

STATISTICAL AND SOCIAL CONDITIONS OF THE AREA.

SOCIAL CONDITIONS.

Area (Acres), 4,604 acres, plus 80 acres inland water, 150 acres
foreshore and 185 acres half River Tyne

Population Registrar General's preliminary report 1951 Census	66,544
Population (Estimated Mid Year 1952 by Registrar General) ...	66,900
Number of private families. 1952 Register	20,065
Average number of persons per family. 1952 Register ...	3.302
Rateable Value (1st April, 1952)	£481,344
Sum represented by a penny rate (1951/52)	£1,948

VITAL STATISTICS.

Marriages and Births.

Number of Marriages	587
Total LIVE BIRTHS (Registrar General's figures)	1,222

Compiled as follows :—

	<i>Males.</i>	<i>Females.</i>
Legitimate	559	598
Illegitimate	32	33
	<hr/> 591	<hr/> 631

The NETT TOTAL LIVE BIRTHS assignable to the Borough as above (1,222) gives an ANNUAL LIVE BIRTH RATE of 18.26 per 1,000 of the population.

The LIVE BIRTH RATE for England and Wales was 15.3 per 1,000 of the population.

The percentage of ILLEGITIMATE LIVE BIRTHS to the total live births for the Borough equalled 5.3.

STILLBIRTHS during the year totalled 33

Compiled as follows :—

	<i>Males.</i>	<i>Females</i>
Legitimate	18	15
Illegitimate	—	—
	<hr/> 18	<hr/> 15

The STILLBIRTH RATE for the Borough was 26.3 per 1,000 births.

The STILLBIRTH RATE per 1,000 of the population for the Borough equalled 0.49

The STILLBIRTH RATE per 1,000 of the population for England and Wales equalled 0.35

DEATHS.

DEATHS assignable to the Borough during the year totalled ... 774

Compiled as follows :—

<i>Males.</i>	<i>Females.</i>
428	346

The DEATH RATE per 1,000 of the population for the Borough equalled 11.56

The DEATH RATES per 1,000 of the population for England and Wales and the Great Towns were 11.3 and 12.1 respectively.

INSTITUTIONAL DEATHS.

Deaths of persons belonging to the Borough which occurred in Hospitals, etc., were as follows :—

Preston Hospital	127
Tynemouth Victoria Jubilee Infirmary ...	32
Frater Maternity Home	1
Moor Park Isolation Hospital	—
Priory Nursing Home	9
*Holmlands	37
*The Elms	1
Cleveland Villa Nursery	1
Other Institutions outside the Borough....	73
	<hr/> 281

36.2% of all deaths of residents of the Borough took place in Institutions.

* This is National Assistance Act, 1948, Part III accommodation, and includes 16 deaths relating to persons originally residing outside the Borough, but who are now reckoned as ' residents ' by the Registrar General.

**Registrar-General's List of Causes of Death at different periods
of life in the County Borough of Tynemouth during 1952.**

MALES.

Short List No.	Causes of Death.	Under 1 Year.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 and over	Total all Ages
1	Tuberculosis, respiratory ...	—	—	—	1	4	6	3	—	14
2	Tuberculosis, other ...	—	—	—	—	—	—	—	—	—
3	Syphilitic disease ...	—	—	—	—	1	3	2	1	7
4	Diphtheria ...	—	—	—	—	—	—	—	—	—
5	Whooping cough ...	—	—	—	—	—	—	—	—	—
6	Meningococcal infections ...	—	—	—	—	—	—	—	—	—
7	Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—
8	Measles ...	—	—	—	—	—	—	—	—	—
9	Other infective and parasitic diseases ...	—	—	—	—	1	—	—	—	1
10	Malignant neoplasm, stomach...	—	—	—	—	—	10	6	1	17
11	Malignant, neoplasm, lung, bronchus ...	—	—	—	—	2	11	7	2	22
12	Malignant neoplasm, breast ...	—	—	—	—	—	—	—	—	—
13	Malignant neoplasm, uterus ...	—	—	—	—	—	—	—	—	—
14	Other malignant and lymphatic neoplasms ...	—	1	—	—	2	13	14	10	40
15	Leukaemia, aleukaemia ...	—	—	—	—	—	—	1	—	1
16	Diabetes ...	—	—	—	—	—	—	—	—	—
17	Vascular lesions of nervous system ...	—	—	—	—	—	16	19	18	53
18	Coronary disease, angina ...	—	—	—	—	2	29	21	20	72
19	Hypertension with heart disease	—	—	—	—	—	—	2	5	7
20	Other heart disease ...	—	—	—	1	2	9	15	38	65
21	Other circulatory disease ...	—	—	—	—	—	2	9	7	18
22	Influenza ...	—	—	—	—	—	—	—	—	—
23	Pneumonia ...	7	—	—	—	1	1	7	3	19
24	Bronchitis ...	1	—	—	—	—	4	8	4	17
25	Other diseases of respiratory system ...	1	—	—	—	—	1	1	—	3
26	Ulcer of stomach and duodenum	—	—	—	1	—	3	3	—	7
27	Gastritis, enteritis and diarrhoea	—	—	—	—	—	—	—	—	—
28	Nephritis and nephrosis ...	—	—	—	—	1	1	2	1	5
29	Hyperplasia of prostate ...	—	—	—	—	—	—	—	—	—
30	Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	—
31	Congenital malformations ...	1	—	—	—	—	—	—	—	1
32	Other defined and ill-defined diseases ...	16	—	—	2	1	9	6	8	42
33	Motor vehicle accidents ...	—	2	—	1	1	1	—	—	5
34	All other accidents ...	—	—	—	1	3	1	2	3	10
35	Suicide ...	—	—	—	—	1	1	—	—	2
36	Homicide and operations of war	—	—	—	—	—	—	—	—	—
	Totals ...	26	3	—	7	22	121	128	121	428

Deaths under one year of age :—

Legitimate male children ... 26.
Illegitimate male children ... —.

**Registrar-General's List of Causes of Death at different periods
of life in the County Borough of Tynemouth during 1952.**

FEMALES.

Short List No.	Causes of Death.	Under 1 Year	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 and over	Total all Ages
1	Tuberculosis, respiratory ...	—	—	—	—	7	—	2	—	9
2	Tuberculosis, other ...	—	—	—	1	1	—	1	—	3
3	Syphilitic disease ...	—	—	—	—	—	—	—	—	—
4	Diphtheria ...	—	—	—	—	—	—	—	—	—
5	Whooping cough ...	—	—	—	—	—	—	—	—	—
6	Meningococcal infections ...	—	—	—	—	—	—	—	—	—
7	Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—
8	Measles ...	—	—	—	—	—	—	—	—	—
9	Other infective and parasitic disease ...	—	—	—	—	—	—	—	—	—
10	Malignant neoplasm, stomach...	—	—	—	—	—	2	8	8	18
11	Malignant neoplasm, lung, bronchus ...	—	—	—	—	—	1	2	—	3
12	Malignant neoplasm, breast ...	—	—	—	—	1	4	3	2	10
13	Malignant neoplasm, uterus ...	—	—	—	—	3	1	1	—	5
14	Other malignant and lymphatic neoplasms ...	—	—	—	—	1	6	7	9	23
15	Leukaemia, aleukaemia ...	—	—	—	—	—	—	—	—	—
16	Diabetes ...	—	—	—	—	—	—	—	2	2
17	Vascular lesions of nervous system ...	—	—	—	1	—	5	33	28	67
18	Coronary disease, angina ...	—	—	—	—	1	12	10	13	36
19	Hypertension with heart disease ...	—	—	—	—	—	4	2	9	15
20	Other heart disease ...	—	—	—	—	1	8	14	38	61
21	Other circulatory disease ...	—	—	—	—	2	—	7	8	17
22	Influenza ...	—	—	—	—	1	—	1	—	2
23	Pneumonia ...	8	1	—	—	1	2	3	3	18
24	Bronchitis ...	—	—	—	—	—	—	1	2	3
25	Other diseases of respiratory system ...	—	—	—	—	—	—	—	—	—
26	Ulcer of stomach and duodenum ...	—	—	—	—	—	—	1	1	2
27	Gastritis, enteritis and diarrhoea ...	2	—	—	—	—	—	—	1	3
28	Nephritis and nephrosis ...	—	1	—	—	—	—	1	2	4
29	Hyperplasia of prostate ...	—	—	—	—	—	—	—	—	—
30	Pregnancy, childbirth, abortion ...	—	—	—	—	1	—	—	—	1
31	Congenital malformations ...	4	—	—	—	1	—	—	—	5
32	Other defined and ill - defined diseases ...	11	—	1	1	4	3	4	10	34
33	Motor vehicle accidents ...	—	—	—	—	—	—	—	—	—
34	All other accidents ...	1	—	—	—	—	—	1	2	4
35	Suicide ...	—	—	—	—	—	1	—	—	1
36	Homicide and operations of war ...	—	—	—	—	—	—	—	—	—
Totals ...		26	2	1	3	25	49	102	138	346

Deaths under one year of age :—

Legitimate female children ... 24.
 Illegitimate female children ... 2.

PRINCIPAL CAUSES OF DEATH.

	No. of Deaths.	Proportion of Deaths per 1,000 Deaths from all causes.
Cardio-Vascular Diseases ...	292	377.2
Vascular Lesions of Nervous System	120	155.0
Respiratory Diseases ... (excluding Tuberculosis)	62	81.3
Cancer		
All forms ...	139	179.5
Deaths from all causes ...Total	774	

MATERNAL MORTALITY.

COMPARATIVE TABLE OF MATERNAL DEATHS FOR PAST 10 YEARS.

Year.	Live Births.	Birth Rate.	TYNEMOUTH.		England and Wales Maternal Mortality per 1,000 live and stillbirths.
			No. of Maternal Deaths (R.G.)	Maternal Mortality per 1,000 live and stillbirths.	
1943	1,019	19.45	2	1.96	2.29
1944	1,252	21.90	0	0.00	1.93
1945	1,144	19.47	2	1.75	1.79
1946	1,358	21.32	0	0.00	1.43
1947	1,433	22.02	5	3.39	1.17
1948	1,291	19.54	2	1.51	1.02
1949	1,311	19.72	2	1.48	0.98
1950	1,174	17.71	3	2.46	0.86
1951	1,228	18.52	2	1.58	0.79
1952	1,222	18.26	1	0.80	0.72
Average of 10 years.	1,243	19.79	1.9	1.49	1.29

A five-yearly average, set out below, shows the progressive decline in the number of Maternal Deaths.

<i>Period.</i>					<i>Average.</i>
1910/14	...	...	...	...	8.8
1915/19	...	...	...	...	8.0
1920/24	...	...	...	...	4.8
1925/29	...	...	...	...	5.8
1930/34	...	...	...	...	6.2
1935/39	...	...	...	...	3.2
1940/44	...	...	...	...	2.6
1945/49	...	...	...	...	2.2

NEO-NATAL MORTALITY.

33 NEO-NATAL DEATHS of residents gave a Mortality Rate (of infants under one month of age per 1,000 live births), of 27.0. 29 of these deaths occurred in Institutions.

INFANTILE MORTALITY RATES OF CHILDREN UNDER ONE YEAR OF AGE.

Deaths of resident infants under one year of age totalled 52, which gives an INFANTILE MORTALITY RATE of 42.5 deaths per 1,000 live births.

The INFANTILE MORTALITY RATES for England and Wales and for the Great Towns were 27.6 and 31.2 respectively.

BIRTHS AND DEATHS STATISTICS DURING 1952 AND PREVIOUS YEARS.

Year.	Births.		Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.			
	Nett.		Number.	Rate per 1,000 of Popula'n	Outward	Inward	Under 1 Year of Age.		At all Ages.	
	Number.	Rate per 1,000 of Popula'n					Number	Rate per 1,000 Nett Births.		Number.	Rate per 1,000 of Popula'n
1934	1,172	17.77	1,022	15.5	229	47	85	77	840	12.73
1935	1,201	17.38	1,033	15.3	255	46	76	63	824	12.23
1936	1,209	18.10	1,022	15.3	286	37	78	65	773	11.57
1937	1,087	16.25	1,135	16.9	323	46	72	66	858	12.83
1938	1,104	16.60	1,054	15.8	307	50	67	61	797	11.98
1939	1,119	16.70	1,038	15.9	303	57	76	68	792	12.14
1940	1,060	17.74	1,139	19.2	299	65	71	67	840	14.06
1941	897	15.95	1,244	22.1	274	96	85	95	1,066	18.95
1942	908	16.97	947	17.5	231	71	84	92	787	14.71
1943	1,019	19.45	1,017	19.4	306	69	78	76	780	14.89
1944	1,252	21.90	1,047	18.3	295	64	83	66	816	14.29
1945	1,144	19.47	1,073	18.3	333	57	78	68	797	13.56
1946	1,358	21.32	1,068	16.8	334	62	82	60	796	12.49
1947	1,433	22.02	964	14.8	251	59	80	56	772	11.86
1948	1,291	19.54	1,008	15.28	277	69	61	47	800	12.11
1949	1,311	19.72	929	13.97	224	57	53	40	762	11.46
1950	1,174	17.71	986	14.87	203	88	65	51	871	13.14
1951	1,228	18.52	990	14.93	242	77	86	70	825	12.44
1952	1,222	18.26	943	14.0	252	83	52	40	774	11.5

The following is a table of Statistics relating to the Borough since its incorporation in 1849, illustrating the increase in population and decrease in both birth and death rates.

Year.	Population.	Nett Deaths.	Death Rate per 1,000 of Population.	Nett Births.	Live Birth Rates per 1,000 of Population.
1849	28,448	—	—	—	—
1871	38,941	—	—	—	—
1873	39,923	929	23.3	1,557	39.0
1874	40,424	1,075	26.6	1,542	38.1
1875	40,932	963	23.5	1,607	39.2
1880	43,533	928	21.3	1,521	34.9
1885	46,600	960	20.2	1,612	33.9
1890	46,403	973	20.9	1,533	33.0
1895	48,632	984	20.2	1,533	31.5
1900	51,038	1,074	21.0	1,649	32.3
1901	51,520	1,007	19.5	1,780	34.5
1902	52,224	1,009	19.3	1,753	33.5
1903	52,938	969	18.3	1,734	32.7
1904	53,661	1,031	19.2	1,851	34.5
1905	54,394	1,066	19.6	1,775	32.6
1906	55,137	1,022	18.5	1,759	31.8
1907	55,891	926	16.5	1,796	32.1
1908	56,654	951	16.8	1,896	33.4
1909	57,428	958	16.7	1,874	32.6
1910	58,223	971	16.6	1,788	30.7
1911	59,008	927	15.7	1,653	28.0
1912	59,809	957	16.0	1,734	28.9
1913	60,601	951	15.6	1,748	28.8
1914	60,688	992	16.3	1,736	28.6
1915	58,199	1,038	17.8	1,549	26.6
1916	57,192	968	16.9	1,573	25.2
1917	57,591	895	15.5	1,416	22.0
1918	55,758	1,141	20.4	1,471	23.5
1919	58,007	1,064	18.3	1,613	26.5
1920	60,541	956	15.8	1,947	32.1
1921	63,900	877	13.7	1,708	26.7
1922	64,640	855	13.2	1,618	25.03
1923	65,330	833	12.75	1,576	24.12
1924	65,940	900	13.64	1,521	23.06
1925	66,180	901	13.61	1,452	21.94
1926	66,560	766	11.5	1,341	20.14
1927	67,080	863	12.86	1,337	19.93
1928	66,030	833	12.62	1,252	18.9
1929	65,880	862	13.08	1,203	18.26
1930	65,880	787	11.94	1,280	19.41
1931	64,720	814	12.57	1,276	19.71
1932	65,630	748	11.41	1,238	18.86
1933	65,770	873	13.27	1,135	17.25
1934	65,950	840	12.73	1,172	17.77
1935	67,350	824	12.23	1,201	17.38
1936	66,800	773	11.57	1,209	18.1
1937	66,880	858	12.83	1,087	16.25
1938	66,510	797	11.98	1,104	16.6
1939	65,220	792	12.14	1,119	16.7
1940	59,730	840	14.06	1,060	17.74
1941	56,240	1,066	18.95	897	15.95
1942	53,500	787	14.71	908	16.97
1943	52,370	780	14.89	1,019	19.45
1944	57,100	816	14.29	1,252	21.90
1945	58,760	797	13.56	1,144	19.47
1946	63,690	796	12.47	1,358	21.32
1947	65,070	772	11.86	1,433	22.02
1948	66,050	800	12.11	1,291	19.54
1949	66,480	762	11.46	1,311	19.72
1950	66,270	871	13.14	1,174	17.71
1951	66,300	825	12.44	1,228	18.52
1952	66,900	774	11.56	1,222	18.26

SEPARATE OCCUPIERS.

During 1952, lists of Separate Occupiers were compiled from information obtained from the Civilian Residence Register, and I set out below details shown in Wards.

<i>Ward.</i>	<i>Number of Separate Occupiers.</i>			
Chirton	2,461
Collingwood	3,084
Cullercoats	2,053
Dockwray	1,963
Linskill	1,909
Percy	2,298
Preston	1,907
Trinity	2,181
Tynemouth	2,387
Total ...				<hr/> 20,243

Based on the Registrar-General's estimated population for the year 1951, *i.e.* 66,300, the local average of persons per family equalled 3.275.

METEOROLOGY.

Air Temperatures and Rainfall.

LAT. 55° 1' N.

LONG. 1° 25' W.

1952.	Air Temperature in Degrees Fahrenheit.		Rainfall.	
	Absolute.		Total Fall.	Percentage of average.
	Max.	Min.	ins.	%
January ...	54	22	5.39	—
February ...	43.4	34.7	0.68	50
March ...	46.4	38.7	1.41	78
April ...	53.5	41.6	1.63	115
May ...	56.4	47.1	2.00	101
June ...	77	—	—	—
July ...	65.2	54.7	0.63	26
August ...	—	—	—	—
September ...	—	—	—	—
October ...	52.3	45.8	1.88	60
November ...	44.9	38.3	4.16	195
December ...	42.0	35.8	3.19	146

REGISTRATION OF NURSING HOMES.

There is 1 Nursing Home containing 15 beds registered under the Public Health Act, 1936 in the Borough. Routine inspections have shewn this home to be run in a very satisfactory manner.

No new applications for registration were received during the year.

NURSES ACT 1943.

There are no Nurses Agencies licensed under Section 8 of the Nurses Act 1943, within the area of the County Borough of Tynemouth.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

No premises or persons have yet been registered with the Council of the County Borough of Tynemouth, under the provisions of the above Act.

BLIND PERSONS.

The total number of blind persons on the Register of the Welfare Department at the end of the year was 137. Under Section 176 of the Public Health Act, 1936, for the prevention of blindness and for the treatment of eye diseases or injury, 25 primary examinations were carried out, 14 of these cases were found to be blind within the meaning of the Blind Persons Act and 2 were found to be not blind. 9 cases were registered as Partially Sighted. 19 re-examinations were made and of these, 9 were blind, 4 partially sighted and 6 were de-certified.

NATIONAL ASSISTANCE ACT, 1948.

It was not found necessary during the year to invoke Section 47 of this Act for the removal of persons in need of care and attention to suitable premises.

LABORATORY FACILITIES.

All pathological specimens are examined by the Public Health Laboratory Service, which is directed by the Medical Research Council for the Ministry of Health at the Public Health Laboratory, Government Buildings, Ponteland Road, Newcastle upon Tyne, 5.

NATIONAL HEALTH SERVICE ACT, 1946
PART III.

HEALTH CENTRES (Sec. 21).

No progress was made during 1952 in connection with the provision of Health Centres.

CARE OF MOTHERS AND YOUNG CHILDREN (Sec. 22).

Institutional Provision for Unmarried Mothers and Illegitimate Infants and other Children.

Under the above provisions, the following work was done during the year.

Tynemouth Moral Welfare Association. (Voluntary—Subsidised by Council). Cases investigated 82. Cases placed in homes 20. 930 visits were paid and received.

CHILD WELFARE.

Three Sessions are held weekly at the Public Health Department Central Clinic for the weighing of children and consultations with mothers concerning the child's health and feeding.

Subsidiary clinics are held at the Meadow Well School to serve the western districts of the Borough and at Y.M.C.A. Buildings, Cullercoats, to meet the needs of the eastern parts of the Borough. The northern parts of the Borough are served by a subsidiary centre at New York Village.

One weekly session is held at these latter clinics.

CARE OF PREMATURE INFANTS.—*i.e.* babies weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of period of gestation. Stillbirths *excluded*.

Number of premature infants notified during the year (including transferred notifications) whose mothers normally reside in Tynemouth area :—

(i)	Born at home	...	...	...	...	...	16
(ii)	Born in private nursing home	...	...	...	...	...	9
(iii)	Born in hospital	...	...	...	...	...	72

Child Welfare Centres.

	Number of centres provided at end of year	Number of Child Welfare sessions now held <i>per month</i> at centres in col. (2)	Number of children who attended centres in col. (2) during the year	Number of children who first attended the centres during the year, and who on the date of their first attendance were :—		Number of children in attendance at the end of the year who were then :—		Total Number of attendances made by children included in col. 4 during the year	
				Under 1 year of age (5)	Over 1 year of age (6)	Under 1 year of age (7)	Between the ages of 1 and 5 (8)	Under 1 year of age (9)	Over 1 year of age (10)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Local Health Authority centres	4	24	1,806	841	100	678	616	6,924	1,665
Centres provided by Voluntary Organisations	—	—	—	—	—	—	—	—	—

CARE OF ILLEGITIMATE CHILDREN.

As in previous years special attention has been given by the Health Visiting staff to the close supervision of this class of children. In addition the Visitor of the Tynemouth Moral Welfare Association has devoted much time to the surveillance of homes where there are illegitimate children. (See also under Tynemouth Moral Welfare Association on Page 13.)

PROMOTION OF CLEANLINESS AMONGST YOUNG CHILDREN.

Special efforts have been made by the Health Visitors and School Nurses to reduce the incidence of Scabies and of verminous conditions. Much work relating to disinfestation of children is carried out regularly at the School Clinic.

NURSERY SCHOOLS.

There are two Nursery Schools administered by voluntary organisations in the Borough. Both schools have places for 80 children.

The Lovaine Day Nursery, which was opened in March, 1943, as a war-time day nursery (the premises were eventually purchased by Tynemouth Corporation in November, 1949), recorded an improvement in attendances during the year, the average daily attendance of children under two years of age being three, and of children two to five years of age, thirty.

It is feared, however, with the advent of the full economic charge coming into force at the turn of the year in place of the hitherto minor charge made for meals only, that this Nursery may have to close down.

**REPORT BY R. W. ESSENHIGH, SENIOR SCHOOL DENTAL OFFICER,
ON THE DENTAL TREATMENT PROVIDED FOR EXPECTANT
AND NURSING MOTHERS AND YOUNG CHILDREN DURING
1952.**

The special session held each Monday afternoon at the Public Health Department for the dental inspection of expectant and nursing mothers and pre-school children was continued during 1952.

A total of 27 mothers were dentally examined and the majority required some form of dental treatment. These mothers were referred to local private practitioners for treatment under the provisions of the National Health Service.

Of the total of 99 pre-school children who were examined many required medical treatment for the improvement in the calcification of their teeth. The distribution of capsules for this purpose was continued as before and a very marked beneficial change in the condition of many mouths was noted.

The examination and treatment of the pre-school children which was commenced in 1948 has resulted in a considerable improvement in the dental conditions of entrants to the Primary Schools and as this work continues the school dental inspections will prove that early dental inspection and treatment are essential for healthy mouths in school children.

Thanks are again due to the Medical and Nursing Staffs of the Public Health Department for their valued assistance and co-operation during the year.

NUMBERS PROVIDED WITH DENTAL CARE :

	Examined	Needing Treatment.	Treated	Made Dentally Fit.
Expectant and Nursing mothers	28	26	*	*
Children under five ...	99†	57	*	*

FORMS OF DENTAL TREATMENT PROVIDED :

	Ex-trac-tions	Anaesthetics		Fill-ings	Scal-ings or Scal-ing and gum treat-ment	Silver Nit-rate treat-ment	Dress-ings	Radio-graphs	Dentures provided	
		Local	Gen-eral						com-plete	par-tial
Expectant and Nursing mothers **	—	—	—	—	—	—	—	—	—	—
Children under five	—	—	—	—	—	—	—	—	—	—

* Up to the present time dentures when required, have been supplied by General Dental Practitioners through the General Dental Service to whom such cases have been referred.

** Patients in this category were referred to General Dental Practitioners for the necessary attention under the General Dental Service.

† In addition, 149 re-examinations were carried out.

ULTRA-VIOLET LIGHT CLINICS.

Clinics are held twice each week at the Public Health Department. Conditions treated during the past year were, Debility 5 ; Other conditions 4 ; a total of 9 cases, who made 195 attendances.

MILK (MOTHERS AND CHILDREN) ORDER.

Dried milk and other foods are sold during the various Maternity and Child Welfare sessions. The local branch of the W.V.S. continued to provide invaluable assistance in this work. During the year, a total of 5,112 lbs. of dried milk was distributed, as against a total of 5,412 lbs. during the previous year.

The total amount expended by the Local Authority on the purchase of dried milk during the year was £679. 4s. 0d.

The local Food Office was responsible for the distribution of 63,419 20 oz. tins of National Dried Milk, 12,661 bottles of cod liver oil, 52,818 bottles of orange juice and 3,571 packets of cod liver oil capsules.

MIDWIFERY (Sec. 23).

ANTE-NATAL AND POST-NATAL CLINICS.

(1)	Number of clinics provided at end of year (whether held at Child Welfare Centres or other premises)	Number of sessions now held <i>per month</i> at clinics included in col. (2)	Number of women in attendance		Total number of attendances made by women included in col. (4) during the year
			Number of women who attended during the year	Number of new cases included in col. (4) i.e. for A.N. clinics women who had <i>not</i> previously attended any clinic during current pregnancy and for P.N. clinics women who had <i>not</i> previously attended any P.N. clinic after last confinement	
(1)	(2)	(3)	(4)	(5)	(6)
<i>Local Health Authority clinics :</i>					
Ante-natal clinics	1	13	386	293	1,593
Post-natal clinics	1	2	71	71	78
<i>Clinics provided by Voluntary Organisations:</i>					
Ante-natal clinics	Nil	Nil	Nil	Nil	Nil
Post-natal clinics	Nil	Nil	Nil	Nil	Nil

Ante-Natal Clinics were also held at the Tynemouth Victoria Jubilee Infirmary, and at Preston Hospital, for the convenience of patients booking at these institutions.

MEDICAL AID UNDER SECTION 14 (1) OF THE MIDWIVES' ACT, 1951.

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives' Act, 1951, by a Midwife :—

(a) For Domiciliary cases :—

(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service.	...	...	6
(ii) Others.	...	...	65
TOTAL	...	...	71

(b) For cases in Institutions ... Nil.

MATERNITY OUTFITS.

443 Sterilised Maternity Packs were issued free of charge to expectant mothers.

ADMINISTRATION OF GAS AND AIR ANALGESIA.

Training courses in the administration of Gas and Air Analgesia are available at the Obstetrics and Gynaecology Department of Newcastle General Hospital. All the Municipal Midwives are now qualified to administer analgesia.

Full details of the year's work are as follows :—

Institutional Midwives.

Number of **Institutional** Midwives in practice in the area at the end of the year qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board :—

(a) Employed in homes and hospitals in the National Health Service	9
(b) Employed in nursing homes or in maternity homes and hospitals not in the National Health Service ...	Nil.
TOTAL	9

Pethedine.

During the year domiciliary midwives administered pethedine on 232 occasions whilst acting as Midwives, and on 4 occasions whilst acting as Maternity Nurses.

Domiciliary Midwives.

	<i>Domiciliary</i> Midwives employed directly by Local Health authority	<i>Domiciliary</i> Midwives employed in public midwifery service under Section 23 by voluntary organisations as agents of Local Health Authority	<i>Domiciliary</i> Midwives employed in public midwifery service under Section 23 by hospital authorities as agents of Local Health Authority	<i>Domiciliary</i> Midwives in private practice or employed by organisations <i>not</i> acting as agents of Local Health Authority	Total
Number of <i>domiciliary</i> midwives practising in the area at 31st December, 1952, who were qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives B'rd	7	—	—	—	7
Number of sets of apparatus for the administration of gas and air in use by <i>domiciliary</i> midwives employed in the Authority's domiciliary midwifery service at 31st December, 1952	8	—	—	—	8
Number of cases in which gas and air was administered by midwives in <i>domiciliary</i> practice during the period 1st January, 1952, to 31st December, 1952 :—					
(i) When acting as a midwife	141	—	—	—	141
(ii) When acting as a maternity nurse ...	58	—	—	—	58

MATERNITY CASES ATTENDED.

	Number of maternity cases in the area of the Local Supervising Authority attended by Midwives during 1952			
	Domiciliary cases		Cases in Institutions	
	As Midwives	As Maternity Nurses	As Midwives	As Maternity Nurses
(1) Midwives employed by the Authority	288	118	Nil	Nil
(2) Midwives employed by Voluntary Organisations :				
(a) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	Nil	Nil	Nil	Nil
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	Nil	Nil	Nil	Nil
(3) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	Nil	Nil	958	423
(4) Midwives in Private Practice (including Midwives employed in Nursing Homes)	Nil	Nil.	Nil	105

NOTIFICATION OF BIRTHS.

A total of 1,802 births including non-residents were notified during the year (1,751 live and 51 stillbirths).

9 births were not notified, but immediately on the requirements of the Public Health Act, 1936, being brought to the notice of the persons concerned, these were officially intimated.

PUERPERAL PYREXIA.

During the year one case of puerperal pyrexia occurred in a domiciliary confinement.

HEALTH VISITING (Sec. 24).

(1)	Number of Health Visitors employed at end of year		Equivalent Whole-Time Health Visitor services provided under col. (3) (all classes including attendance at Child Welfare Centres) (4)	Number of visits paid by Health Visitors during the year							
	Whole-time on health visiting (2)	Part-time on health visiting (3)		Expectant mothers		Children under 1 year of age		Children between the ages of 1 and 5		Other cases	
				First visits (5)	Total visits (6)	First visits (7)	Total visits (8)	First visits (9)	Total visits (10)	First visits (11)	Total visits (12)
Local Health Authority	—	11	5	60	79	1296	6202	96	9736	1866	2743
Voluntary Organisations	—	—	—	—	—	—	—	—	—	—	—

In addition to visits enumerated above, 4,805 ineffective visits were made.

HOME NURSING (Sec. 25).

Eight whole time district nurses are under the direct control of the Superintendent Nursing Officer, who is a member of the staff of the Public Health Department. All requests for the services of a district nurse must be supported by a certificate from the patient's own doctor.

During the year, the district nurses paid 20,201 visits to 707 patients.

Loan equipment, in the form of bed pans, back rests, air cushions, etc., are available free of charge and considerable use of this service has been made by patients.

VACCINATION AND IMMUNISATION (Sec. 26).

Efforts to have infants vaccinated are still being continued by direct approach to parents by health visitors and by postal reminders.

Record cards received from general practitioners show that 230 children under one year of age were vaccinated in 1952, as against 217 in 1951.

In addition 81 other persons were vaccinated and 105 were re-vaccinated.

NUMBER OF PERSONS VACCINATED (or re-vaccinated) DURING 1952						
Age at date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	230	11	16	16	38	311
Number re-vaccinated ...	—	1	8	13	83	105
NUMBER OF CASES SPECIALLY REPORTED DURING 1952 (age groups as above).						
(a) Generalised Vaccinia	—	—	—	—	—	—
(b) Post-vaccinal Encephalomyelitis...	—	—	—	—	—	—
(c) Death from compli- cations of vaccina- tion other than (a) and (b)	—	—	—	—	—	—

DIPHTHERIA.

IMMUNISATION.

Facilities are available for Diphtheria Immunisation at the School Medical Services Clinic and at the various Maternity and Child Welfare Centres of the Public Health Department.

During the year, 934 children received a complete course of injections; 117 were school children and 817 were pre-school children.

In addition, 755 children of all ages were given reinforcing injections.

IMMUNISATION IN RELATION TO CHILD POPULATION.

Number of children who had completed a full course of Immunisation at any time up to 31st December, 1952.								
Age at 31.12.52 <i>i.e.</i> Born in Year ...	Under 1 1952	1 1951	2 1950	3 1949	4 1948	5 to 9 1943-47	10 to 14 1938-42	Total under 15
Number Immunised	29	547	697	827	867	5,052	4,067	12,086
Estimated mid-year child population 1952	Children under five 6,040					Children 5-14 10,260		16,300

DIPHTHERIA NOTIFICATIONS AND DEATHS IN RELATION TO IMMUNISATION.

NOTIFICATIONS.			DEATHS.		
Age at date of Notifica- tion	Number of Cases Notified	Number of cases included in pre- ceding column in which the child had completed a full course of immunisation	Age at date of Death	Number of Deaths	Number of cases included in pre- ceding column in which the child had completed a full course of immunisation
Under 1	Nil	Nil	Under 1	Nil	Nil
1 ...	Nil	Nil	1 ...	Nil	Nil
2 ...	Nil	Nil	2 ...	Nil	Nil
3 ...	1	1	3 ...	Nil	Nil
4 ...	1	Nil	4 ...	Nil	Nil
5 to 9 ...	Nil	Nil	5 to 9 ...	Nil	Nil
10 to 14	Nil	Nil	10 to 14	Nil	Nil
Totals	2	1	Totals	Nil	Nil

It is estimated that at 31st December, 1952, 74.15% of the child population (*i.e.*, children under 15 years of age) had been immunised, as compared with 73.9% in 1951.

ATTACK AND MORTALITY RATES.

The following table illustrates the incidence of Diphtheria in the Borough since 1901. The figures are shown in five yearly periods from 1901 to 1940, and in yearly periods from 1941 to date.

Period.	Population 5 yearly average.	Total cases notified per 5 yearly period.	Attack Rates per 1,000 of the population.	Total Deaths per 5 yearly period.	Fatality Rates per 1,000 cases notified.	Fatality Rates per 1,000 of the population.
1901-1905	52,947	179	3.380	38	212	.717
1906-1910	56,666	345	6.088	49	142	.864
1911-1915	59,661	324	5.430	38	117	.636
1916-1920	57,818	182	3.147	19	105	.328
1921-1925	65,198	182	2.791	20	109	.306
1926-1930	66,286	562	8.478	36	64	.543
1931-1935	65,884	222	3.369	20	90	.303
1936-1940	65,028	561	8.627	29	35	.445
1941	56,240	182	3.236	11	60	.195
1942	53,500	218	4.074	12	55	.224
1943	52,370	87	1.661	4	46	.076
1944	57,100	132	2.311	2	15	.035
1945	58,760	115	1.957	3	26	.051
1946	63,690	63	0.989	1	16	.015
1947	65,070	11	0.169	Nil	Nil	Nil
1948	66,050	3	0.045	2	666*	.030
1949	66,480	3	0.045	Nil	Nil	Nil
1950	66,270	Nil	Nil	Nil	Nil	Nil
1951	66,300	1	0.015	Nil	Nil	Nil
1952	66,900	2	0.029	Nil	Nil	Nil

* Although there were 2 deaths this year it must be borne in mind that only 3 cases were notified, these 3 cases not having been immunised ; hence what appears to be an abnormally high fatality rate.

AMBULANCE SERVICES (Sec. 27).

Details of the work of the Ambulance Service during the year are enumerated in the following table. This service is operated concurrently with the Fire Service.

Ambulance Services.

(1)	(2)	Number of vehicles at 31-12-52	Total Number of calls during year	Total Number Journeys during year	Total Number Patients carried during year	Number of Accident & other Emergency Calls included in Columns (4) & (5) during year (7)	Total Mileage during year	Number of paid Wholtime Staff at 31 12-52
Directly provided Service	Ambulances	6§	11,937	6,829	11,433	705	55,750	18*
	Cars	2	5,524	3,196	5,305	41	36,499	
Agency Service(s)	Ambulances	Nil	Nil	Nil	Nil	Nil	Nil	Nil
	Cars	Nil	Nil	Nil	Nil	Nil	Nil	
Supplementary Service(s)	Ambulances	Nil	Nil	Nil	Nil	Nil	Nil	Nil
	Cars	Nil	Nil	Nil	Nil	Nil	Nil	

§ One more ambulance is held for Civil Defence training.

* This number is the number of Firemen allowed above the Fire Brigade Establishment and provides drivers and attendants only ; other operational and administrative staff also share in the operation of the Service.

PREVENTION OF ILLNESS, CARE AND AFTER CARE (Sec. 28).**Tuberculosis.**

Two patients in sanatorium made application for financial assistance to enable them to undertake correspondence courses whilst undergoing treatment. Grants were made in these cases by the Local Education Authority.

Several applications were received for extra nourishment in the form of eggs and milk, but on investigation it was found that the patients in question had incomes sufficiently large as to place them outside the scope of the local Health Authority's scheme.

CONVALESCENT HOME TREATMENT.

Three patients, recently discharged from sanatorium, were admitted to Doxford Hall Convalescent Home, Northumberland, during the year, for short periods of convalescence.

Domiciliary Visiting.

During the year the Health Visitors paid 1,565 visits to the homes of tuberculous patients.

DOMESTIC HELP (Sec. 29).

During the year, out of 153 enquiries for domestic assistance, home help was provided in 92 cases.

Of these 92 cases, 22 related to confinements, 3 to cases of tuberculosis, and 67 cases of illness amongst the aged and infirm.

An average of six part-time home helps was employed during the year.

NATIONAL HEALTH SERVICE ACT, 1946,**PART V.****MENTAL HEALTH.****Administration.**

The administration of the Mental Health Services of the Borough is carried out by the Mental Health Sub-Committee which meets monthly and which consists of eight members of the Health Committee and five co-opted members elected annually by the Health Committee, such appointments not being subject to confirmation by the Council. The Committee considers, and reports to the Health Committee, all matters connected with Lunacy and Mental Deficiency, with the exception of certain functions under the Lunacy Acts which are discharged by the Welfare Committee.

Staff Employed in Mental Health Service.

R. H. Dawson, M.B., Ch.B., D.P.H., Medical Officer of Health.

M. B. Steel, M.B., Ch.B., D.P.H., Asst. Medical Officer of Health.

3 General Practitioners for the purposes of the Mental Deficiency Acts, 1913-1938 :

N. D. Gofton, M.B., B.S.

S. C. Stonier, M.D.

J. C. Yeoman, M.B., B.S.

11 Health Visitors.

3 Duly Authorised Officers for Lunacy and Mental Treatment Acts.

3 Duly Authorised Officers for Mental Deficiency Acts (Members of the Town Clerk's Staff).

All the members of the Staff enumerated are engaged in this branch of work on a part-time basis.

Co-ordination with Regional Hospital Board and Hospital Management Committee (joint use of Officers).

G. McCoull, O.B.E., V.R.D., M.D., Q.H.P., Medical Superintendent of Prudhoe and Monkton Mental Deficiency Hospital conducts a Mental Deficiency Clinic at the Tynemouth Public Health Department. During the year 11 clinics were held and the following cases dealt with :—

New Cases, 23 ; 55 cases paid secondary visits.

Patients residing in Tynemouth who are on licence from Prudhoe and Monkton Hospital are supervised by the Hospital's Welfare Officer.

Duties Delegated to Voluntary Associations.

Nil.

Training of Mental Health Workers.

No special arrangements have yet been initiated for the further training of Mental Health Workers.

Work Undertaken in the Community under Section 28 of the National Health Service Act, 1946.

An occupation centre for the training of Mental Defectives has not yet been established in Tynemouth.

LUNACY AND MENTAL TREATMENT ACTS.

The total number of cases dealt with by the Duly Authorised Officers during the year was 100.

Out of the total of 100 cases dealt with, 78 were admitted directly to Preston Hospital; 1 was admitted directly to St. George's Mental Hospital, Morpeth as a voluntary patient, 4 were admitted directly to St. George's Mental Hospital as certified patients, and in 17 cases no action was necessary under the Lunacy Acts.

Of the 78 cases admitted to Preston Hospital, 39 were certified by the medical staff of the Hospital and transferred therefrom to St. George's Hospital, 26 were discharged home, 6 were transferred to Part III Accommodation (National Assistance Act, 1948), 1 was retained as a hospital patient, 3 entered St. George's Mental Hospital, Morpeth, as voluntary patients, 1 died in Hospital, 1 was transferred to the local Infirmary and 1 entered a Nursing Home.

In the majority of the cases, the Duly Authorised Officers have found it necessary to visit the patients' homes, seeking information regarding the patient, and they have on practically all occasions given advice and guidance to the relatives.

Work Undertaken in the Community under the Mental Deficiency Acts, 1913—1938.

Ascertainment is carried out in co-operation with Tynemouth Education Authority and general practitioners. New cases are referred to Dr. McCoull for specialist diagnosis. The number of defectives awaiting vacancies in institutions at the end of the year was 23.

8 cases were ascertained as "subject to be dealt with" and 1 other was reported, but found on investigation as "not subject to be dealt with".

1 patient was under guardianship during the year and 111 were under supervision, which is carried out by the Health Visitors. No scheme for the Domiciliary training of Mental Defectives is in operation.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

The following table shows the hospitals used by the Local Health Authority and the number of patients under treatment at the 31st December, 1952.

	Prudhoe and Monkton Hospital.	The General Hospital, South Shields.	Rampton Hospital, Retford.	Durran Hill House, Carlisle.	Aycliffe Hospital, Darlington.	Northgate and District Hospital, Morpeth.
Males ...	57	5	1	—	5	—
Females ...	37	—	1	1	—	1

PREVALENCE OF INFECTIOUS AND OTHER DISEASES.

MEASLES AND WHOOPING COUGH.

The following table shows the number of deaths from Measles and Whooping Cough (Registrar General) together with the number of notifications received during the year.

Whooping Cough :—

Cases Notified	...	...	...	106
Deaths at all ages	...	...	...	Nil

Measles :—

Cases Notified	...	...	...	524
Deaths at all ages	...	...	...	Nil

DIARRHOEA AND ENTERITIS.

During the year there were 2 deaths amongst children under 2 years of age, which is equal to a mortality rate of 1.6 per 1,000 live births.

The mortality rates for England and Wales, and the Great Towns were 1.1 and 1.3 respectively.

OPHTHALMIA NEONATORUM.

No cases were notified during the year.

PEMPHIGUS NEONATORUM.

During the year, no cases were notified.

FOOD POISONING.

No outbreaks of food poisoning occurred during the year.

CANCER.

Deaths and Death Rates from Cancer.

	1910 -14	1915 -19	1920 -24	1925 -29	1930 -34	1935 -39	1940 -44	1945	1946	1947	1948	1949	1950	1951	1952
Deaths ...	244	287	319	315	403	474	529	95	122	114	124	99	128	104	139
Death Rate per 1,000 living ...	0.82	1.00	0.99	0.95	1.23	1.42	1.89	1.62	1.91	1.75	1.87	1.48	1.93	1.57	2.07
Proportion of deaths per 1,000 deaths from all causes	51	56	72	74	99	117	125	119	153	147	155	130	147	126	179

TUBERCULOSIS.

**New Cases and Mortality from Pulmonary and Non-Pulmonary
Forms of Tuberculosis during 1952.**

Age Periods.	New Cases.				Deaths (Registrar-General).			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ...	1	—	—	—	—	—	—	—
1- 5 ...	1	5	4	3	—	—	—	—
5-10 ...	4	1	1	1	—	—	—	—
10-15 ...	—	4	2	1				
15-20 ...	8	7	—	1				
20-25 ...	6	6	—	—	5	7	—	2
25-35 ...	11	13	5	—				
35-45 ...	8	5	—	—				
45-55 ...	13	3	—	—	6	—	—	—
55-65 ...	9	2	—	—				
65 and over...	1	1	—	—				
Totals ...	62	47	12	6	14	9	—	3

Pulmonary Tuberculosis :—Deaths 23 ; mortality rate per 1,000 of the population is equal to 0.34.

Non-Pulmonary Tuberculosis :—Deaths 3 ; mortality rate per 1,000 of the population is equal to 0.04.

NOTIFIABLE DISEASES (other than Tuberculosis).

Period	Scarlet Fever		Whooping Cough		Acute Poliomyelitis				Measles		Diph- theria		Acute Pneumonia		Dysentery		Smallpox	
					Paralytic		Non- paralytic											
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
FIRST QUARTER ...	...	4	2	...	...	...	1	...	57	64	...	2	6	1	...	...	...	...
SECOND QUARTER ...	7	2	5	3	...	...	...	...	108	123	...	...	2	1	...	...	...	...
THIRD QUARTER ...	2	1	32	42	1	...	...	...	38	38	...	...	2	...	1	...	...	...
FOURTH QUARTER ...	3	5	16	6	...	...	...	...	38	58	...	...	...	...	...	...	...	...
TOTALS ...	12	12	55	51	1	...	1	...	241	283	...	2	10	2	1	...	...	...
	24		106		1		1		524		2		12		1		...	

Period	Acute Encephalitis				Enteric or Typhoid fever		Paratyphoid fevers		Erysipelas		Meningococcal infection		Food poisoning		Puerperal Pyrexia		Ophthalmia Neonatorum		Other Notifiable Diseases	
	Infective		Post-infectious																	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
FIRST QUARTER	2	1	...	...	...	1	...	...	...	...
SECOND QUARTER	1	...	...	...	...	...	...	...
THIRD QUARTER	1	...	...	1	1	...	...	...	...	...	...	...	...	...
FOURTH QUARTER	1	2	...	...	...	...	...	...	...	...	...
TOTALS	1	...	2	2	5	1	...	1	...	1	...	...	...	...
		1		2		6		1		1		...		...

WATER.

The water supply for domestic and general use, in the County Borough of Tynemouth, is provided by the Water Undertaking of the Local Authority, which is also responsible for providing water supplies to several other areas in South East Northumberland.

This water is derived from two principal sources, namely, an upland surface catchment area and from springs. Surface water constitutes approximately 75% of the total quantity, the remaining 25% being of spring origin. Both of these sources are situated approximately 25 miles from the Borough. The surface water is filtered and chlorinated at the works adjacent to the impounding reservoir. The supply is then joined by the spring water some eight miles from the works.

In recent years the main supply has been augmented by water derived from the undertaking of the Newcastle and Gateshead Water Company, now amounting to half a million gallons per day. This was continued during the year 1952 and is likely to be a feature of the supply for some years to come, for, although the main supply was increased considerably during the year under review by water extracted from the River Wansbeck, the total supply provided by the undertaking of the Local Authority is not sufficient to satisfy the increased demand.

The water supply is distributed to the town through three service reservoirs, all of which are covered.

The total number of samples of water derived from various points of the Corporation's water undertaking throughout the year, for the purpose of bacteriological examination was two hundred and thirty-one. Of these, seventy-nine were obtained from piped supplies within the County Borough. A further thirty-nine related to raw water. The remainder had their origin at various points located in that part of South East Northumberland supplied by the Tynemouth Water Department.

The few samples obtained within the County Borough of Tynemouth which failed to satisfy the accepted standards for drinking water, were in each case followed up and subsequent investigation and further samples from the same points indicated that the defects were definitely localised and of a temporary character.

The following tables summarise the results of bacteriological examinations :—

Table relating to the Bacteriological Examination of Samples of Water derived from Piped Supplies within the County Borough of Tynemouth.

Probable No. of coliform bacilli per ml.	No. of Samples. (MacConkey—2 days at 37°C)
0	72
Up to 2	5
„ 5	1
„ 10	Nil
„ 50	1
Over 50	Nil
Total No. of Samples examined 79	

Table of Results relating to 46 Samples of Raw Water.

Source.	No of samples, indicating probable No. of Coliform Bacilli present. (MacConkey—2 days at 37°C.).							Total No. of Samples
	0	1 to 2	3 to 5	6 to 10	11 to 50	51 to 180	Over 180	
Fontburn (upland surface)	—	2	2	—	7	1	2	14
Tomboy Springs (Fontburn) ...	—	—	—	—	—	—	—	—
Tosson Springs ...	8	3	1	—	—	—	—	12
Cartington Springs	2	4	2	2	1	1	1	13
River Wansbeck ...	—	—	—	—	—	—	—	—

The total number of samples derived from various points in the water undertaking of the Corporation, submitted for chemical analysis during the year, was twenty-seven. Of these, ten related to piped supplies within the County Borough. A typical result is set out in detail below. The remaining samples did not differ materially from this example.

Date received: 9.9.52. Sample marked: "Moorhouse Cottages, North Shields.

Chemical Results.

Parts per 100,000.

Total solids dried at 180°C.	...	...	...	...	...	14.0
Chlorine as chlorides	...	...	...	...	...	1.24
Free ammonia	...	...	...	...	...	Trace
Albuminoid ammonia	...	...	...	...	...	0.004
Nitrogen as nitrates	...	...	...	...	...	0.03
Oxygen absorbed (4 hours at 80°F.)	...	...	...	...	...	0.380
Total hardness	...	...	...	...	...	8.5
Permanent hardness	...	...	...	...	...	1.5
Temporary hardness	...	...	...	...	...	7.0
Lead and Copper	...	...	...	...	...	None
Iron	...	...	...	...	...	0.02
Appearance and Colour (Hazen degrees 50)	...	...	...	...	Pale yellow & clear	
Smell and Taste	...	...	...	...	...	Satisfactory
Microscopical examination of deposit	...	...	...	...	...	Satisfactory
pH value	...	...	...	...	...	7.0
Lead solvency (L.G.B.)	...	...	...	...	0.02 part per 100,000	

Report.

This sample of water is considerably less deep in colour than that examined in March of this year, the oxygen absorbed and the lead solvency figures, therefore, are also both less.

The water is of satisfactory organic purity and I am of the opinion that it is suitable for drinking and domestic use.

Sgd. W. GORDON CAREY,

Public Analyst.

The number of dwelling houses supplied from piped water mains is approximately 18,200. It is estimated that 13,700 of these are supplied direct to the house, whilst the remaining 4,500 (approx.) are dependent upon outside taps in yards, etc.

Swimming Baths. There is a large open-air swimming pool, situated at the South end of Tynemouth Long Sands, and in addition, there is an open-air swimming bath at Hawkey's Lane, North Shields. The former is filled with salt water, while the latter derives its supply from the Tynemouth Corporation water undertaking. Both are open for the summer season only. Continuous filtration and chlorination are used at both pools, the amount of free chlorine present in the water being estimated daily, during the season. Bacteriological examinations and chemical analyses of samples of these waters were satisfactory.

SANITARY INSPECTION OF THE BOROUGH.

To THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
COUNTY BOROUGH OF TYNEMOUTH.

YOUR WORSHIP, LADIES AND GENTLEMEN,

I beg to submit my Annual Report upon the Sanitary Inspection of the Borough during the year 1952, and wish to take this opportunity of expressing my thanks to the members of the Health Committee, and to all colleagues for their helpful co-operation and keen interest shown during the year.

The high costs of repairs are such that owners of the majority of the older properties in the Borough are unable to execute repairs necessary to maintain them in a reasonable state of repair. As a result, there are at the present time, approximately 700 houses where little can be done for the tenants, except to serve notices upon the owners to keep the properties weatherproof. Until Slum Clearance is commenced on a large scale, there is little possibility of any improvement in these conditions.

I have the honour to remain,

Your obedient servant,

C. A. MURRAY, Cert.S.I.E.J.B.,

Cert. Meat Inspection,

Senior Sanitary Inspector.

SANITARY INSPECTION.

Total number of inspections made						...	...	16,329
Total number of re-inspections made						...	...	6,576
						Inspection.	Re-inspections.	
Accumulations	...	...	...	...	...	132	208	
Animals, Poultry, etc.		...	...	...	...	53	2	
Ashplaces	...	...	...	...	...	12	6	
Ashbins	...	...	...	...	...	87	91	
Bakehouses (with mechanical power)	...			...	...	77	—	
„ (without mechanical power)	...			...	...	38	1	
Butchers' Shops and Stores			...	...	...	329	16	
Cesspools	...	...	...	...	...	9	2	
Closets—Water	...	...	...	...	...	511	442	
„ —Privies	...	...	...	...	...	30	20	
„ —Tubs	...	...	...	...	...	53	7	
Cold Stores	...	...	...	...	...	1	—	

Dairies, Milkshops and Milkstores	...	...	559	9
Dangerous Structures	...	...	9	8
Drains—Inspected	...	...	383	487
„ —Smoke Tests	...	...	31	—
„ —Chemical Tests	...	...	20	—
„ —Water Tests	...	...	24	—
Entertainment Houses	...	...	28	2
Factories (with mechanical power)	...	...	249	12
„ (without mechanical power)	...	...	70	13
„ (Outworkers)	...	...	—	—
Fishmongers' Shops and Stores	...	...	351	30
Fish Curing Premises	...	...	23	2
Fish Quay	...	...	303	1
Fish Frying Premises	...	...	69	1
Houses (Ordinary)	...	...	9	—
„ (Overcrowded)	...	...	510	11
Housing Enumeration (Part IV)	...	...	684	16
Houses (Consolidated Regulations)	...	...	14	103
„ (Clearance Areas, etc.)	...	...	9	16
Housing Act (other buildings)	...	...	55	—
Houses : Let in Lodgings	...	...	31	4
Infectious Diseases	...	...	77	32
Food Preparing Premises—Ice Cream	...	...	324	15
„ „ „ —Cooked Meats	...	...	498	36
Meat and Food Inspections	...	...	657	1
„ „ „ Condemnations	...	...	421	1
„ „ „ Seizures	...	...	1	—
Meetings with Owners or Tradesmen	...	...	638	7
Merchandise Marks Act	...	...	376	1
Miscellaneous Visits	...	...	853	—
Offensive Trade Premises (excluding Fish Fryers)	...	...	78	2
Piggeries	...	...	42	1
Rats and Mice Destruction	...	...	528	1,303
Samples—Food and Drugs Act	...	...	177	7
„ —Pathological	...	...	86	—
„ —Rag Flocks Act	...	...	—	—
„ —Water	...	...	13	—
„ —Fertilizers and Feeding Stuffs Act	...	...	5	3
Sanitary Inspections	...	...	223	—
Seamen's Lodging Houses	...	...	13	—
Shops Act, Section 38 (1950)	...	...	1,568	94
Slaughterhouses—Private	...	...	24	—
Special Notices (Meat Regulations)	...	...	66	—
Schools	...	...	13	—
Smoke Observations	...	...	282	—
Special Visits	...	...	682	8
Sewers, etc.	...	...	166	13
Street Gullies	...	...	194	16
Streets or Back Roads	...	...	84	12
Stables	...	...	10	5

Tips	62	—
Nuisances	858	3,388
Urinals—Public	52	2
„ —Private	34	—
Van Dwellings	16	1
Verminous Premises	143	41
Yards and Courts	53	5

Complaints

Complaints received	1,224
Complaints confirmed	994
Matters referred to other Departments	107
Nuisances found	858
Premises where work has been carried out without service of notice	85

Nuisances and Defects Remedied during 1952.

	Public Health Acts.		Housing Acts.	Tynemouth Corporat'n. Act.
	Informal.	Statutory.	Statutory.	Statutory.
No. of defects remedied under 1951 notices	444	181	68	5
Informal notice defects transferred to statutory notices...	185	—	—	—
No. of defects remedied under 1952 notices... ..	681	86	—	155
No. of defects outstanding at end of 1952	363	129	172	6

THE FACTORIES ACT, 1937.—Inspections.

Premises.	Number on Register.	Number of		
		Inspections	Written notices.	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	69	71	5	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...	228	249	8	—
(iii) Other Premises in which Section 7 is enforced by the the Local Authority (excluding out-workers' premises) ...	—	—	—	—
TOTALS	297	320	13	—

The following defects were dealt with on receipt of notices from H.M. Inspector of Factories, and remedied in the course of inspections.

CASES IN WHICH DEFECTS WERE FOUND.

Particulars.	Number of cases in which defects were found.				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	8	8	—	4	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3)	1	1	—	1	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient ...	3	1	—	1	—
(b) Unsuitable or defective ...	5	4	—	3	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTALS	17	14	—	9	—

There was a total of 297 factories on the Register at the end of the year, 228 with mechanical, and 69 without mechanical power.

OUTWORKERS.

One notice under Section 110 of the Factories Act, 1937, was received during the year.

MEANS OF ESCAPE IN CASE OF FIRE.

Under the provisions of Section 34(1) factories of certain categories are now required to be certified by the Council as having adequate means of escape in case of fire. 13 certificates were approved during the year.

BAKEHOUSES.

There were 50 premises on the Register at the end of the year, all of which were inspected regularly. It was not necessary to serve any notices during the year.

MOVEABLE DWELLINGS (P.H. Act, 1936, Sec. 269).

During the year 17 visits were made to the 4 sites in the Borough housing 6 Caravans. All are on a yearly Licence.

SHOPS ACT, 1950 (Section 38).

Under the provisions of the above Act, 1,662 visits were made to inspect sanitary conveniences and other arrangements for the welfare of the assistants.

ASHPITS.

There are 7 ashpits, 29 privy ashpits and 16 pail closets in the Borough.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

During the year 1,831 visits were made to 773 premises, for the purpose of ascertaining rat infestations ; business premises with a high risk of infestation receiving special attention. Notices were served with successful results in certain difficult cases. The remedy of drainage and structural defects together with the use of traps, poison baits, etc., resulted in the majority of the premises being cleared. All work was carried out by Sanitary Inspectors, with the help of two trained operators from the Borough Surveyor's Department.

One Maintenance treatment of the Sewers was carried out in accordance with the recommendations of the Infestation Control Division of the Ministry of Agriculture and Fisheries. This consisted of two days pre-bait, one day poison bait and a final day's visit to ascertain the amount of bait consumed, etc. The estimated kill for this treatment was 5,900 rats.

Two Block Control treatments to Fish Quay premises were carried out during the year and resulted in a calculated kill of 569 rats.

During the year, privately owned and Corporation properties, including tips, were treated by the Corporation, whilst certain privately owned works and other premises, where treatment was carried out either by direct labour or by servicing firms resulted in a calculated kill of 2,389 rats. Farms and small holdings have also received attention.

ERADICATION OF BED BUGS.

Number of Council Houses	...	...	...	1
Number of Other Houses	...	...	...	24
Number of Houses de-infested	...		...	25

Dwellinghouses were sprayed with insecticide after preparation of rooms, *e.g.*, stripping off wallpaper and removing skirting boards, etc. Infested bedding was de-infested by steam disinfection.

The dwellings, furniture and effects of all prospective Corporation tenants are inspected for evidence of vermin, and freed before removal to Corporation Houses, by a six hour concentrated fumigation with Sulphur Dioxide (2.8% S.O.₂); the gas being kept circulating by means of electric fans.

All deinfestation is carried out by experienced men employed directly by the Local Authority.

Deinfestation of privately owned and occupied property is not carried out by the Department. The services of a Sanitary Inspector are given in an advisory capacity, sprays being loaned free of charge, and insecticide sold at cost price.

DISINFECTION OF PREMISES AND ARTICLES OF CLOTHING.

The following table shows the number of rooms disinfected and the number of articles of clothing removed and disinfected at Moor Park Hospital Disinfecting Station during the year.

Disease.							Rooms.	Articles of Clothing.
Diphtheria	...	...	...	...	...	...	—	22
Scarlet Fever	...	...	...	...	...	...	25	171
Tuberculosis	...	...	...	...	...	...	51	230
Vermin	...	...	...	...	...	...	41	30
Measles	...	...	...	...	...	...	—	20
Other Diseases	...	...	...	...	...	...	28	610
Total							145	1083

SEAMEN'S LODGING HOUSES.

There were two Seamen's Lodging Houses, having accommodation for 36 males, on the Register at the end of the year. 13 visits were made during the year. The Chief Constable also made periodic inspections and reported his satisfaction.

THEATRES, MUSIC HALLS, etc.

30 inspections were made in connection with ventilation, sanitation or cleanliness of cinemas. The Chief Constable, who is also Inspector of Public Buildings has had inspections made.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

Eleven informal samples of Fertilisers were taken during the year. The Public Analyst reported 3 samples as satisfactory, 8 as non-genuine, one of which was deficient in one ingredient and 7 containing an excess of an ingredient.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.

The above Act, which repeals the previous Acts of 1911 and 1928, came into operation on the 1st November, 1951.

Its purpose is to secure the use of clean filling materials in upholstered and other articles which are stuffed and lined.

During the year, 3 premises were registered where rag flock and other filling materials are used, on payment of the prescribed fee.

The total number of premises registered is 7.

No samples were taken during the year.

OFFENSIVE TRADES.

Regular inspections have been made on premises at which Offensive Trades are carried on, and the Regulations have been strictly enforced. A list of Offensive Trades registered in this Borough is given herewith :—

Tripe Boiling ...	...	...	...	4
Gut Scraping ...	...	...	...	1

In addition to these premises, regular visits have been made to analogous trades (fish liver boiling, fish meal and manure manufacture).

INSPECTION AND TESTING OF DRAINS.

The total number of tests made during the year was 75 of which 31 were Smoke Tests, 20 Chemical Tests and 24 Water Tests. The drains and sanitary conveniences of new buildings are dealt with by the Borough Surveyor's Staff.

RENT & MORTGAGE INTEREST (Restrictions) ACTS, 1920-23.

No applications for certificates were received during the year.

HOUSING.

New dwellings erected under the Corporation Housing Scheme during the year :—

NEW HOUSES ERECTED DURING 1951.

(A) Total number of Houses Erected :—

(1) By the Local Authority ...	...	...	...	137
(2) By other Local Authorities ...	...	...	...	—
(3) By other bodies or persons ...	...	...	...	55

(B) Houses erected with State Assistance under the Housing Acts (Included in A above).

(1) By the Local Authority :—

(a) For the purpose of Part II of the Act (1925)	Nil.
(b) Do. Part III do.	Nil.
(c) For other purposes ...	Nil.
(d) Housing Act, 1936 ...	Nil.

The above information has been supplied by the Borough Surveyor.

I.—Inspection of Dwelling houses during the Year.

(1) (a) Total number of dwellinghouses inspected for housing defects under Public Health or Housing Acts	1,281
(b) Number of inspections made for the purpose ...	1,427
(2) (a) Number of dwellinghouses included under sub-head (1) above which were inspected and recorded under the Housing Consolidation Regulations, 1925-1932	14
Number of inspections made for the purpose ...	103
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	11
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects, reasonably fit for human habitation	1,270

II.—Remedy of Defects during the Year without Service of Formal Notice

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	450
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III.—Action under Statutory Powers during the Year.**(A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.**

(1) Number of dwellinghouses in respect of which notices were served requiring repairs... ..	10
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—	
(a) By Owners	2
(b) By Local Authority in default of Owners ...	—

(B) Proceedings under Public Health Acts.

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied ...	1,260
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—	
(a) By Owners	362
(b) By Local Authority in default of Owners ...	35

(C) Proceedings under Sections 11 and 13 of the Housing Act, 1936.

(1) Number of dwellinghouses in respect of which Demolition Orders were made	3
---	---

(2) Number of dwellinghouses demolished in pursuance of Demolition Orders	Nil.
(D) Proceedings under Section 12 of the Housing Act, 1936.	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ...	9
(2) Number of separate tenements or underground rooms in which Closing Orders were determined, the tenement or room having been rendered fit	Nil.

IV.—Overcrowding. Housing Act, 1936.

A revision of the position with regard to the state of overcrowding in the Borough was undertaken during 1952.

The over-all percentage of overcrowded properties is now shown to be 4.13% as compared with 3.88% in 1951, 4.01% in 1950, and 4.76% in 1939.

Details of the revised position are as follows:—

(a) Total number of separate occupiers in the Borough				
	Corporation	5,506		
	Private	14,737		
		————		20,243
(b) Total number of dwellings found to be overcrowded				
	Corporation	555		
	Private	282		
		————		837
(c) Degree of Overcrowding.				
Corporation Properties (On bedroom standard only) ...		10.08%		
Private Properties (On total room standard)		1.91%		
Total Properties (779)		4.13%		

Whilst the degree of overcrowding in Corporation properties appears to be high, it is to be borne in mind that the standard recognised by the Ministry of Health for Corporation Properties is higher than that used for the assessment of overcrowding in privately-owned properties, any sleeping accommodation likely to be provided in the living room in the former being excluded from the appropriate standard.

As a means of comparison, I submit details in respect of the overcrowding in the separate wards of the Borough as follows :—

Table "A" —Corporation Properties Only.

Table "B" —Private Properties only.

Table "C" —All Properties.

TABLE "A"—CORPORATION PROPERTIES ONLY.

Ward.	Uncrowded.	Overcrowded.	Total.	Percentages.
CHIRTON... ..	1214	183	1397	13.09
COLLINGWOOD... ..	1488	76	1564	4.86
CULLERCOATS	423	6	429	1.39
DOCKWRAY	88	24	112	21.42
LINSKILL	31	9	40	22.50
PERCY	1304	240	1544	15.54
PRESTON	20	4	24	16.66
TRINITY	8	—	8	—
TYNEMOUTH	375	13	388	3.35
TOTAL	4951	555	5506	10.08%

TABLE "B"—PRIVATE PROPERTIES ONLY.

Ward.	Uncrowded.	Overcrowded.	Total.	Percentages.
CHIRTON... ..	1063	1	1064	0.09
COLLINGWOOD... ..	1492	28	1520	1.84
CULLERCOATS	1606	21	1627	1.29
DOCKWRAY	1769	82	1851	4.43
LINSKILL	1828	41	1869	2.19
PERCY	740	14	754	1.85
PRESTON	1864	19	1883	1.00
TRINITY	2106	67	2173	3.08
TYNEMOUTH	1987	9	1996	0.45
TOTAL	14455	282	14737	1.91%

TABLE "C"—ALL PROPERTIES.

Ward.	Uncrowded.	Overcrowded.	Total.	Percentages.
CHIRTON... ..	2277	184	2461	7.47
COLLINGWOOD... ..	2980	104	3084	3.37
CULLERCOATS	2026	27	2053	1.31
DOCKWRAY	1857	106	1963	5.34
LINSKILL	1859	50	1909	2.62
PERCY	2044	254	2298	11.05
PRESTON	1884	23	1907	1.20
TRINITY	2114	67	2181	3.07
TYNEMOUTH	2365	22	2387	0.92
TOTALS	19406	837	20243	4.13%

A further Table "D" is given, as a means of comparison with previous Surveys.

TABLE "D"—COMPARATIVE TABLE SHOWING PERCENTAGE OF OVERCROWDED PROPERTIES SINCE ORIGINAL SURVEY.

Year.	Ward.	Un-crowded.	Over-crowded.	Totals.	Per-centages.
1938	CHIRTON	1876	109	1985	5.40
1949		2217	178	2395	7.43
1950		2276	180	2456	7.33
1951		2295	181	2476	7.31
1952		2277	184	2461	7.47
1938	COLLINGWOOD	1335	134	1469	9.10
1949		2770	62	2832	2.18
1950		2872	86	2958	2.90
1951		2958	88	3046	2.88
1952		2980	104	3084	3.37
1938	CULLERCOATS	1264	70	1334	5.30
1949		1618	24	1642	1.46
1950		1709	27	1736	1.55
1951		1838	26	1864	1.39
1952		2026	27	2053	1.31
1938	DOCKWRAY	2019	352	2371	14.80
1949		1995	88	2083	4.22
1950		1882	92	1974	4.66
1951		1854	103	1957	5.26
1952		1857	106	1963	5.34
1938	LINSKILL	2076	252	2328	10.80
1949		1938	35	1973	1.72
1950		1921	44	1965	2.23
1951		1925	44	1969	2.23
1952		1859	50	1909	2.62
1938	PERCY	2020	78	2098	3.10
1949		2005	245	2250	10.88
1950		2057	246	2303	10.67
1951		2050	244	2294	10.63
1952		2044	254	2298	11.05
1938	PRESTON	1627	72	1699	4.30
1949		1912	21	1933	1.08
1950		1905	22	1927	1.14
1951		1908	19	1927	0.98
1952		1884	23	1907	1.20
1938	TRINITY	2098	347	2445	14.20
1949		2188	81	2269	3.57
1950		2177	70	2247	3.11
1951		2155	51	2206	2.31
1952		2114	67	2181	3.07
1938	TYNEMOUTH	1046	58	1104	5.30
1949		2177	13	2190	0.59
1950		2096	23	2119	1.08
1951		2303	23	2326	0.98
1952		2365	22	2387	0.92
1938	TOTALS... ..	15361	1472	16833	8.74
1949		18820	747	19567	3.81
1950		18895	790	19685	4.01
1951		19286	779	20065	3.88
1952		19406	837	20243	4.13

TABLE "E"—GENERAL SUMMARY.

SIZE OF FAMILIES.				
	Up to 6½ Units	7 to 9 Units	9½ Units and Over	Totals
Private ...	245	29	8	282
Corporation ...	356	166	33	555
	601	195	41	837
236 "Large" Families.				

It will be observed from the foregoing Tables that there is now a total of 837 overcrowded families in the Borough as against the figure of 779 presented in my last report.

Whilst some slight improvement is shown in the smaller family groups, I wish to draw attention to the fact that there is an increase in the larger unit groups. There appears to be no hope of making any reduction in this figure, unless special provision can be made for them.

An analysis of the 236 overcrowded "large" families is given below.

TABLE "F."

SIZE OF FAMILY														
	7	7½	8	8½	9	9½	10	10½	11	11½	12	12½	13	Total
Private ...	12	6	8	1	2	3	1	1	3	—	—	—	—	37
Corporation	38	39	49	25	15	7	12	5	2	2	3	1	1	199
TOTALS ...	50	45	57	26	17	10	13	6	5	2	3	1	1	236

INSPECTION AND SUPERVISION OF FOOD.

CLEAN FOOD CAMPAIGN

The special campaign undertaken to form a Food Traders' Guild of Hygiene has been continued throughout the year. I have to report that although two trades organisations have accepted the Code of Practice, and agreed to the formation of a Guild no further progress has been made.

During the year notices were served successfully in 11 cases for the provision of a constant hot water supply.

MILK SUPPLIES.

The provisions of the Food & Drugs (Milk & Dairies) Act, 1944, were implemented on the 1st October, 1949. Accordingly the supervision of the production of Milk on the Farms, became the responsibility of the Ministry of Agriculture. The Local Authority also continues to be responsible for the supervision of the retail distribution of Milk.

A high percentage of the Milk in the Borough is now Pasteurised, due to the ready facility for Pasteurisation at the new plant erected in the adjacent authority of Whitley Bay, by the joint efforts of the Local Dairymen's Associations of Tynemouth and Whitley Bay.

559 visits were made to dairies, milk shops, etc., and all infringements of the Milk and Dairies Acts and Orders were dealt with satisfactorily.

Consignments of milk coming into the Borough by road and rail and the conditions of the empty churns returned received attention. The keeping qualities of milk from certain outside sources has considerably improved due chiefly to better transport facilities.

Milk Retailers.

Applications for registration received	...	...	...	31
Applications for registration granted	...	...	...	31
Number of Milk Dealers on the Register	...	...	...	179
Dairy premises registered during the year	...	...	...	Nil.
Applications withdrawn	...	...	...	Nil.
Retailers relinquishing registration	...	...	...	25

MILK (SPECIAL DESIGNATIONS) REGULATIONS.

The following table gives the various grades for which licences were granted :—

Dealers Licences to sell Tuberculin-Tested Milk	11
Dealers " " " Tuberculin-Tested Pasteurised Milk	8
Supplementary Licences to sell Tuberculin-Tested Milk	4
Supplementary " " " Tuberculin-Tested Pasteurised Milk	5
Dealers Licences to sell Pasteurised Milk	32
Supplementary Licences to sell Pasteurised Milk	6
Dealers Licences to sell Sterilised Milk	134

MILK SAMPLES FOR BACTERIOLOGICAL EXAMINATION.

During the year 60 samples of Milk were taken for examination and submitted to the Public Health Laboratories at Newcastle and Ponteland. Of the total samples taken 37 were from sources within the Borough and 23 from outside. In addition 14 samples of Pasteurised Milk were submitted to the Public Analyst for the Phosphatase Test.

All of the above 60 samples were examined for Tubercle Bacilli, and all were negative.

The following table sets out the details of the examinations carried out.

RESULTS OF BACTERIOLOGICAL EXAMINATIONS OF MILK.

			<i>Total.</i>	<i>Passed.</i>	<i>Failed.</i>
Accredited Milk.	Methylene Blue Test ...	...	5	4	1
	Coliform Test ...	...	5	4	1
	Tubercle Test ...	...	5	5	—
Pasteurised Milk.	Methylene Blue Test ...	...	15	14	1
	Coliform Test ...	...	—	—	—
	Tubercle Test ...	...	15	15	—
	Phosphatase Test ...	...	15	14	1
Ordinary Milk.	Methylene Blue Test ...	...	31	18	13
	Coliform Test ...	...	31	18	13
	Tubercle Test ...	...	31	31	—
Tuberculin Tested Milk.	Methylene Blue Test ...	...	9	7	2
	Coliform Test ...	...	9	7	2
	Tubercle Test ...	...	9	9	—
Total Graded Milks ...			87	79	8
Total Ordinary Milks			93	67	26
Total Tests Made ...			180	146	34

The producers of unsatisfactory samples in this area were visited, cautioned and given advice, whilst those outside the area were notified, together with the Local Authorities concerned.

ICE-CREAM.

There are 11 producers in the Borough. Equipment has now been modernised, and all ice-cream is produced in accordance with the Ice-Cream (Heat Treatment, etc.) Regulations, 1947-1951.

47 samples were subjected to the Methylene Blue Test similar to that applied to Milk samples. It is suggested by the Ministry that over any six months period 50% of vendors' samples should fall into Grade 1; 80% into Grades 1 or 2; and not more than 20% into Grade 3; and none at all in Grade 4.

The graded results of samples are as follows :—

Grade 1.	Grade 2.	Grade 3.	Grade 4.	Total.
16	11	8	12	47

It is expected that certain unsatisfactory samples will be obtained, until such time as manufacturers become more conversant with their new equipment.

The Food Standards (Ice-Cream) Order, 1951, which came into force on the 1st March, 1951, requires that ice-cream shall contain certain minimum quantities of fat, sugar and milk solids other than fat. 18 samples were taken, all of which complied with these standards.

TYNEMOUTH CORPORATION ACTS, 1916-1934.

Regulations made under these Acts are in force, and no persons are permitted to use premises for the preparation of cooked or preserved foods unless they are registered by the Local Authority, who have power to refuse registration if, in their opinion, the premises are unsatisfactory.

There were 241 persons in the Borough registered as occupiers of premises in which Ice-Cream is sold or manufactured. 141 persons are registered as owners or occupiers of premises in which Preserved Meat, Fish Cakes, or other foods are prepared. These figures do not include premises used for the business of Fish and Potato Frying.

874 visits were made during the year to supervise and emphasise the need for cleanliness in the handling of food. No serious negligence was discovered.

FOOD AND DRUGS.

MILK AND CREAM REGULATIONS, 1912-1927.

- (1) Milk and Cream not sold as Preserved Cream. The following samples were examined for the presence of a preservative: Milk 127; Cream Nil; and Tinned Cream Nil. No preservatives were reported to be present in any of the foregoing samples.
- (2) Thickening Substances. No evidence was found during the year of any addition of thickening substances to Cream.

ARTIFICIAL CREAM ACT, 1929.

There were no samples taken under this Act during the year.

FOOD AND DRUGS ACT, 1938.

The following table sets out details of samples found adulterated during the past five years.

Year.	TOTAL SAMPLES.			MILK SAMPLES.		
	Number Examined.	Number Adulterated.	Percentage Adulterated.	Number Examined.	Number Adulterated.	Percentage Adulterated.
1948	292	12	4.25	109	8	7.34
1949	242	15	6.19	85	6	7.05
1950	243	5	2.57	112	3	2.68
1951	212	8	3.77	110	4	3.63
1952	218	7	3.21	127	2	1.57

Details of samples taken during 1952 are set out in Table I.

SAMPLES TAKEN FOR CHEMICAL ANALYSIS.

TABLE I.

Articles Analysed.	Total.	No. of Samples taken for Analysis.		No. found to be Adulterated.		Percentages of Samples Adulterated.	
		Informal.	Formal.	Informal.	Formal.	Informal.	Formal.
"Bev"	1	1	—	—	—	—	—
Bicarbonate of Soda ...	2	2	—	—	—	—	—
Boracic Ointment ...	1	1	—	—	—	—	—
Butter	1	1	—	—	—	—	—
Castor Oil Cream ...	1	1	—	—	—	—	—
Cheese	1	1	—	—	—	—	—
Cheese Spread	1	1	—	—	—	—	—
Chest & Lung Mixture ...	1	1	—	—	—	—	—
Chicken Pate	1	1	—	—	—	—	—
Cochineal	1	1	—	—	—	—	—
Coffee & Chicory	1	1	—	—	—	—	—
Condiment	1	1	—	—	—	—	—
Cooking Fat	1	1	—	—	—	—	—
Cough Mixture	2	2	—	—	—	—	—
Crab Paste	1	1	—	—	—	—	—
Custard Powder	1	1	—	—	—	—	—
Drawing Ointment	1	1	—	—	—	—	—
Energy Fountain	1	1	—	—	—	—	—
Fish Cakes	8	8	—	4	—	50%	—
Gelatine	1	1	—	—	—	—	—
Germ Ointment	1	1	—	—	—	—	—
Ginger Wine	1	1	—	—	—	—	—
Ginger Cordial	1	1	—	—	—	—	—
Ice-Cream	18	18	—	—	—	—	—
Lemonade	1	1	—	—	—	—	—
Lemon Curd	2	2	—	1	—	50%	—
Malt Vinegar	1	1	—	—	—	—	—
Maclean's Powder	1	1	—	—	—	—	—
Margarine	1	1	—	—	—	—	—
Meat Pies	1	1	—	—	—	—	—
Mint	1	1	—	—	—	—	—
Meat Paste	5	5	—	—	—	—	—
Milk (New)	15	—	15	—	—	—	—
„ (Pasteurised)	47	—	47	—	1	—	2.1%
„ (Sterilised)	22	—	22	—	—	—	—
„ (T.T.)	24	—	24	—	1	—	4.1%
„ (T.T. Pasteurised) ...	19	—	19	—	—	—	—
Orange Flavouring	1	1	—	—	—	—	—
Orange Squash	1	1	—	—	—	—	—
Pepper	1	1	—	—	—	—	—
Pork Pie	1	1	—	—	—	—	—
Pork Sausage	4	4	—	—	—	—	—
Sauce	2	2	—	—	—	—	—
Sausage	10	10	—	—	—	—	—
Sherbet	1	1	—	—	—	—	—
Stomach Pills	1	1	—	—	—	—	—

Articles Analysed.	Total.	No. of Samples taken for Analysis.		No. found to be Adulterated.		Percentages of Samples Adulterated.	
		Informal.	Formal.	Informal.	Formal.	Informal.	Formal.
<i>Continued—</i>							
"Snowball" cake ...	1	1	—	—	—	—	—
Tomato Soup ...	2	2	—	—	—	—	—
Vanilla Flav. Mixture ...	1	1	—	—	—	—	—
Vaseline ...	1	1	—	—	—	—	—
Yorkshire Pudding Mix...	1	1	—	—	—	—	—
TOTALS...	218	91	127	5	2	5.49%	1.57%

PARTICULARS OF ADULTERATED SAMPLES.

TABLE II.

No.	Article.	Defect.	Action Taken
30	Fish-Cakes	Deficient in Fish Content to extent of 12.8%	Letter of caution to retailer and manufacturer
59	Fish-Cakes	Deficient in Fish Content to extent of 10.9%	Letter of caution to manufacturer
119	Milk ... (Pasteurised)	Deficient in Non-Fatty Solids to extent of 4.9%	Letter of caution to supplier
122	Milk (T.T.)	Deficient in Non-Fatty Solids 3.2% Milk Fat 7.3%	Letter of caution to Farmer
182	Fish-Cakes	Deficient in Fish Content to extent of 11.4%	Letter of caution to manufacturer
194	Fish-Cakes	Deficient in Fish Content to extent of 16.0%	Letter of caution to manufacturer
197	Lemon Curd	Deficient in Fat Content to extent of 47.5%	Letter of caution to manufacturer

PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923-1927.

There were no samples examined during the year under these regulations.

PUBLIC HEALTH (DRIED MILK) REGULATIONS 1923-1927.

No samples were taken under these regulations during the year.

PUBLIC HEALTH (PRESERVATIVES IN FOOD) REGULATIONS, 1925-1927.

218 samples were examined during the year, and in no case was any infringement of the regulations discovered.

INSPECTION OF MEAT AND OTHER FOODS.

All slaughtering is now centralised at Whitley Bay under Government Control, and deliveries of meat are made directly to the butchers' shops. Prior to the operation of the Livestock (Restrictions on Slaughtering) Order, 1940, there were 14 private slaughterhouses in Tynemouth subject to annual licence.

29 cases of special slaughter of pigs for home consumption were authorised under a Licence by the Ministry of Food, and the carcasses and organs were inspected.

Inspection of Meat.

345 visits were made to butchers' shops. There are no open stalls used for the sale of meat.

SWINE FEVER.

One case of suspected Swine Fever was reported to the Ministry. The disease was not confirmed after Post-Mortem by the Veterinary Inspector. The carcase was destroyed.

WHALEMEAT.

Since the introduction of the Food and Drugs (Whalmeat) Regulations, 1949, no landings have been made direct from the fishing grounds.

FISH.

During the season, a large number of boats were engaged in herring fishing, and the catches were usually landed and dealt with the same day. All catches were dealt with at the Corporation Fish Quay, and the quality of the fish landed, has been well maintained.

Mr. J. Coxon Fry, Quay Master, has kindly placed at my disposal the following figures showing the volume and value of the trade in fish during the year.

Landings Made direct from the Fishing Grounds.

White Fish	...	...	2,530 landings	253,265 cwts.	£799,893
Herring (Drift Net)	...	3,196	„	212,786 „	£247,259

Imported from Norway and landed at Fish Quay ex Norwegian Carriers.

White Fish	...	...	8 cargoes	12,740 cwts.
Herring	...	...	7 „	53,040 „

SHELLFISH

The condition of shellfish coming into this town continued to receive attention.

During the year, 2 samples were submitted to the Bacteriologist, who reported that one supply was entirely satisfactory and the second source of supply was reasonably clean.

There are no layings within the area of this authority.

TOTAL AMOUNT OF UNSOUND FOOD CONDEMNED.

Food					Tons	Cwts.	Qrs.	Lbs.	Ozs.
Fish	...	...	....	...	37	19	2	4	4
Shellfish	...	...	...	...	—	14	2	9	—
Meat	...	...	...	...	—	19	1	4	15
Poultry	...	...	...	...	—	2	2	3	—
Pork	...	...	...	...	—	18	3	24	10
Rabbits	...	...	...	...	—	—	—	27	—
Tinned Fish	...	...	...	...	—	—	2	27	9
Tinned Meat	...	...	...	...	2	1	2	8	4
Tinned Milk	...	...	...	...	—	2	1	20	11½
Tinned Goods	...	...	...	...	1	1	1	16	7¾
Miscellaneous Groceries	...	...	...	...	2	2	—	26	14
TOTALS					46	3	2	4	11½

MINERAL OIL IN FOOD ORDER, 1949.

No cases were discovered during the year.

APPENDIX

**SURVEY OF LOCAL HEALTH SERVICES PROVIDED UNDER THE
NATIONAL HEALTH SERVICE ACTS**

GENERAL

The services established under the provisions of the National Health Service Acts by the Council of the County Borough of Tynemouth, in fulfilment of its functions as a Local Health Authority, in so far as administration, operation and development are concerned, have conformed generally to the pattern visualised in the proposals submitted to the Minister of Health, and subsequently approved by him.

ADMINISTRATION

In Tynemouth, the detailed consideration of policy, in relation to the services, has been delegated by the Council to its Health Committee and associated Sub-Committees.

The HEALTH COMMITTEE of the Authority consists of thirteen elected representatives. The Sub-Committees, which include co-opted members amongst their personnel, are four in number. Of these, that charged with major responsibility is the HEALTH SUB-COMMITTEE, the duties of which are the consideration and the presentation of reports to the Health Committee on all matters concerning the powers and duties of the Council under the sections of the Act relating to Health Centres (Section 21), Health Visiting (Section 24), Home Nursing (Section 25), Vaccination and Immunisation (Section 26), Prevention of Illness, Care and After-Care (Section 28), and Domestic Help (Section 29). Similarly, the MATERNITY AND CHILD WELFARE SUB-COMMITTEE deals with matters relating to Care of Mothers and Young Children (Section 22), and Midwifery (Section 23), whilst the MENTAL TREATMENT SUB-COMMITTEE considers matters arising from the administration of the Lunacy and Mental Treatment Acts and the Mental Deficiency Acts (Section 51). Finally, to the TUBERCULOSIS CARE SUB-COMMITTEE is delegated the duty of directing the administration of a care scheme set up under the provisions of Section 28.

The HEALTH SUB-COMMITTEE consists of all members of the Health Committee, together with three co-opted members nominated by the South East Northumberland Hospital Management Committee, the Tynemouth Executive Council and the Tynemouth Local Medical Committee, respectively. The MATERNITY AND CHILD WELFARE SUB-COMMITTEE consists of six members of the Health Committee, together with four co-opted members elected by the Council and nominated principally on account of their association with local public or social organisations. Similarly, the MENTAL TREATMENT SUB-COMMITTEE consists of eight members of the Health Committee, together with five co-opted members, and the TUBERCULOSIS CARE SUB-COMMITTEE consists of five members of the Council, together with an equal number of co-opted personnel.

The decisions of the Sub-Committees are submitted to the Health Committee for its endorsement, or otherwise, and subsequently the approval of the Council is required on all relevant matters, prior to any action being taken.

The Medical Officer of Health exercises overall control and direction of all Part III Services. He is assisted by one Assistant Medical Officer of Health, a Superintendent Nursing Officer, eight District Nurses, eleven Health Visitors, seven Midwives, three Duly Authorised Officers, one Chief Clerk and eight clerks.

A proportion of the time of the Assistant Medical Officer of Health, the Superintendent Nursing Officer, Health Visitors and clerical staff is naturally devoted to Public Health duties outside those which are the subject of this survey. The proportion is minimal in the case of the Assistant Medical Officer of Health, the Superintendent Nursing Officer and Health Visitors, although considerable in the case of the clerical staff.

The day to day administration of the Ambulance Service is undertaken by the Chief Fire Officer, who is also designated as Ambulance Officer, the services being combined.

The Assistant Medical Officer of Health discharges her primary duties as Maternity and Child Welfare Medical Officer, by conducting routine maternity and child welfare clinics at which advice is proffered to mothers of young children on their general health, nutrition, etc. She is also responsible for the operation of the ante and post-natal clinics which are related to the Midwifery Service of the Local Health Authority. A considerable proportion of her time is devoted to the School Medical Service in which she deals, *inter alia*, with the ascertainment of mentally defective children. She is also responsible for administrative duties related to Part III Services during the absence on holiday, etc., of the Medical Officer of Health.

The Medical Officer of Health, and his assistant are closely associated with the Superintendent Nursing Officer, who controls the activities of the Health Visitors, Municipal Midwives and District Nurses, and who is designated as Non-Medical Supervisor of Midwives. She is also actively engaged in the administration of the Home and Domestic Help Scheme of the Council.

Close liaison in respect of common problems has been established, and maintained, with the Welfare and Children's Officers of the Local Authority.

Tynemouth Local Health Authority has no joint arrangements for the provision of any Part III Services at the present time, with the exception of a scheme evolved with the Northumberland County Council for co-ordination of the respective ambulance services, involving the interchange of the use of vehicles under certain circumstances.

CO-ORDINATION AND CO-OPERATION WITH OTHER PARTS OF THE NATIONAL HEALTH SERVICE

Co-ordination and co-operation between the local units of the National Health Services has been achieved satisfactorily at the administrative level by the inter-relationship of appointments of individuals to serve on the respective controlling committees, for example, members of the Local Health Authority are also included in the personnel constituting the Newcastle upon Tyne Regional Hospital Board, the South East Northumberland Hospital Management Committee, the Tynemouth Executive Council, the Management Committee for the Prudhoe and Monkton Hospital for Mental Defectives and the Committee of Management for St. George's Mental Hospital, Morpeth, whilst the South East Northumberland Hospital Management Committee, the Tynemouth Executive Council and the Local Medical Committee are represented on the Health Sub-Committee of the Local Health Authority. The Medical Officer of Health is a member of the Tynemouth Executive Council and the Tynemouth Local Medical Committee.

The relationship between the Public Health Department and the General Practitioners of the area; with the Secretaries of the Local Medical Committee, the South East Northumberland Hospital Management Committee and the Tynemouth Executive Council, in relation to the administrative problems of the National Health Service, has always been characterised by co-operative efficiency and complete lack of discord.

Circulars have been issued, from time to time, to General Practitioners and to the Secretaries of the bodies to which reference has been made in the preceding paragraphs, giving details of the services made available by the Local Health Authority, or any changes in these. For example, the hospital authorities are aware that if cases, about to be discharged, require further nursing attention in their own homes that this will be provided on application to the Public Health Department. Similarly, General Practitioners know that Health Visitors may be called upon to visit homes at which there are cases of illness, and in which guidance and advice are required. All interested persons are fully informed as to how and where requests should be made for all the services, the administration of which is set out in detail later in this survey.

A guide to the Local Health Authority's services has been published and made available to members of the general public.

JOINT USE OF STAFF

At the present time, Tynemouth County Borough Council employ the services of two General Medical Practitioners on a part-time basis. These officers are concerned almost wholly with the School Medical Service.

The Authority utilises the services of the Chest Physicians appointed to the area, in connection with the care and after-care of cases of tuberculosis, in accordance with the provisions of Section 28 of the 1946 Act.

The Consultant in Mental Deficiency, based on Prudhoe and Monkton Hospital, visits the Public Health Department, once per month, in order to examine cases referred to him by the medical officers of the Local Authority, and General Practitioners. This has proved to be an extremely useful arrangement.

The Medical Officer of Health and his assistant hold small additional contracts with the Newcastle Regional Hospital Board, for the medical staffing of the Infectious Diseases Ward of a local Infectious Diseases and Tuberculosis Hospital.

VOLUNTARY ORGANISATIONS

Since the introduction of the National Health Service, Tynemouth Local Health Authority has relied on the assistance of voluntary bodies in the administration of those parts of the service which could appropriately be assigned to their respective spheres of activity. In certain instances, financial grants have been made by the Council to voluntary organisations which discharged obligations on behalf of the Local Health Authority.

The Women's Voluntary Service, both before and since the introduction of the National Health Service, has unhesitatingly given greatly appreciated service to the Local Authority in supplying bedding, clothing, etc., to necessitous cases drawn to its attention by members of the Public Health Department staff. Moreover, this same body has been responsible for enlisting volunteer staff for the distribution of dried milk and other food preparations for infants, at the central and subsidiary maternity and child welfare clinics.

The former *Tynemouth District Nursing Association*, which no longer fulfils its original function, the Local Authority having taken over entire responsibility for the Home Nursing Service, still exists, and, as in the case of the Women's Voluntary Service, has given much appreciated aid in supplying bedding and clothing, etc., to patients in need of these items. This Association has also been responsible for making funds available to provide gifts for cases of tuberculosis in hospital. Although not directly associated with the Health Service, this voluntary committee has made arrangements to establish a Chiropody Clinic for elderly people, in the ensuing year.

The *Tynemouth Dorcas Society* provides a third source through which assistance may be obtained in supplying bedding and nursing requisites to persons suffering from illness.

None of these voluntary bodies, to which specific reference has been made above, is in receipt of any financial aid from the Local Authority.

The *Tynemouth Moral Welfare Association* gives assistance in the care of unmarried mothers and their children. In recognition of the service provided, the Local Authority makes a annual financial grant to this voluntary body.

The *Central Council for Health Education* receives the financial support of the Tynemouth Local Health Authority in the realisation of its importance as a national as well as local medium for propaganda.

The *Tynemouth Holiday Agency*, which has been in existence for many years, arranges holidays for persons recommended by the Maternity and Child Welfare Medical Officer and the Chest Physicians. A small grant is made by the Local Authority annually.

The *National Association for Mental Health*, for some years, contracted to discharge the obligations of the Local Health Authority in respect of the after-care of patients who had suffered from mental ill health. This arrangement was terminated as a result of the closure of the Northern Branch of the Association in September, 1951.

The *Tynemouth and District Women's Advisory Centre*, which is affiliated with the Family Planning Association, has been in receipt of financial assistance from the Council for several years, even prior to the operative date of the National Health Service Act, 1946.

PARTICULAR SERVICES

Care of Expectant and Nursing Mothers and Children under School Age

ANTE-NATAL CLINICS :

Ante-natal clinics are held on three half-day sessions per week at the central maternity and child welfare clinic which is located in the Public Health Department. The women who attend are primarily those who have elected to engage a Municipal Midwife to conduct their confinements in their own homes. These women are chiefly multiparae, the proportion of primiparous patients attending being much smaller than was the case prior to the introduction of the General Practitioner Midwifery Service. Another relevant point to be borne in mind, in considering the reasons for the decrease in the number of attendances made by women in their first pregnancy, is that the hospital service gives preference to the admission of primiparae for confinement, particularly where the home conditions are unsatisfactory.

As far as is possible, patients are requested to attend the ante-natal clinics on the specific days on which the Midwife who is engaged for the confinement is on duty. It is also arranged that the Health Visitor for the area of the Borough in which the patients reside will also be present. the ante-natal sessions being staffed by both a Midwife and Health Visitor. The Midwife is present in the Medical Officer's consulting room at the time of the examination, where she carries out urine tests and assists in the collection of blood specimens. The Health Visitor, while attending to the initial engagement of a Midwife by the patients, ensures that something is known of the home conditions, and she takes the opportunity to give short health talks to expectant mothers while they are awaiting medical examination.

Demonstration of the machine for use in gas and air analgesia is given to expectant mothers attending the ante-natal clinics.

MOTHCRAFT TRAINING :

Talks on this subject are given to expectant mothers at the ante-natal clinics principally, one talk being delivered during each session. Advice is proffered individually to nursing mothers at the child welfare centres.

SPECIALIST CLINICS :

No specialist clinics are administered by the Local Health Authority. Specialist advice, however, is readily available through the agency of the local hospitals. The practice usually adopted, in the case of an expectant mother who requires specialist advice, is to refer her to her own medical attendant, in the first instance, who may undertake complete care of the case, refer the case to a consultant, or request the Maternity and Child Welfare Medical Officer to do so on his behalf.

No arrangements have, as yet, been made to enable Midwives or Health Visitors to be present at ante-natal examinations conducted in the consulting rooms of General Practitioners.

EXPECTANT AND NURSING MOTHERS :

The Wassermann reaction is carried out on samples of blood obtained from all expectant mothers during their initial visit to the ante-natal clinic. Investigations relating to blood-grouping and the Rh. factor are also carried out on the blood of all expectant mothers who attend the ante-natal clinics.

In cases where women are proved to be Rh. negative, the husbands are requested to attend by special appointment, in order that similar investigations may be made in respect of their blood.

In cases where the investigation of blood from the umbilical cord of an infant, after delivery in the home, is required, the patient is provided with an appropriate outfit which it is intended should be presented to the midwife on her arrival to conduct the confinement. If the patient's own medical attendant is to be present, he is informed by letter of the desirability of meeting these requirements.

UNMARRIED MOTHERS :

The home and social conditions of unmarried mothers are investigated individually by Health Visitors. Admission to the local hospital is sought in the majority of these cases, and no difficulty has arisen, up to the present, in dealing with them. The Medical Officers of the local hospital are always ready to co-operate in arranging the admission of these cases to hospital for confinement.

In certain instances the Tynemouth Moral Welfare Association, through its Visitor, is able to make arrangements for unmarried expectant mothers to be admitted to special homes in the area, if the circumstances call for such treatment of the case.

POST-NATAL CLINICS :

Two sessions in each month are devoted to post-natal examinations. As in the case of ante-natal examinations, these are carried out by the Maternity and Child Welfare Medical Officer of the Local Authority. The Midwives and Health Visitors have been instructed to impress upon mothers the importance of post-natal examinations.

MATERNITY OUTFITS :

Maternity Outfits are issued at the Public Health Department to all expectant mothers who have elected to be confined in their own homes.

CHILD WELFARE :

Child welfare clinics are held on three half-day sessions weekly, at the Public Health Department, Preston Road, North Shields. In addition, similar facilities are provided at three subsidiary clinics in outlying parts of the Borough, on one half-day session per week.

At the central clinic, one session per week only is attended by the Maternity and Child Welfare Medical Officer. During this particular session, not all the babies are seen by the Medical Officer, but only those by whom difficulty has been presented in feeding, where there has been defective behaviour, or where other conditions have arisen requiring medical advice. The children examined by the Medical Officer on these occasions are selected by the Health Visitors, but arrangements are made whereby any mother with her baby may be interviewed, if this is especially requested.

All case records, including those made by the Health Visitors on home visiting cards, and by the Medical Officer on consultation cards, are reviewed, as the child to whom they apply approaches school age, so that any relevant details of defects, etc., may be passed on to the School Medical Department.

TODDLERS' CLINICS :

No sessions are set aside specifically for the examination of toddlers. This branch of the work is carried out concurrently with the infant welfare clinics. Mothers of children between the ages of three and five are encouraged to bring their children at regular intervals for medical examination.

SUBSIDIARY CLINICS :

The subsidiary maternity and child welfare clinics in the Borough are three in number. The Maternity and Child Welfare Medical Officer attends for two short sessions per month at two of these. They are essentially weighing clinics, but, on the days when the Medical Officer is present, diphtheria immunisation is carried out, and any orthopaedic cases or enquiries with regard to feeding problems are investigated by her.

CONSULTANT CLINICS :

No consultant clinics have been established in the area. Children, whom it is thought require examination by a specialist, are, in the first instance, referred to the family medical attendant, who, as in the case of expectant mothers who require the advice of a consultant, either refers the matter directly to the specialist or requests the Maternity and Child Welfare Medical Officer to make appropriate arrangements on his behalf.

No special child welfare sessions appear to be held by the General Practitioners in the area and, therefore, no requests have been made for the services of Health Visitors to assist in this type of work.

Ultra Violet Light Therapy is made available twice weekly at the central maternity and child welfare clinic. The General Practitioners are aware of the facilities provided, and frequently refer cases to the clinic.

CARE OF PREMATURE INFANTS :

A premature baby unit of exceptional efficiency is located in one of the hospitals in the Borough (Preston Hospital). As a result of this, it has not been deemed necessary to formulate any elaborate arrangements for the care of premature infants in the home. A special cot, obtainable at the Public Health Department, is available for home cases, and special visits, where required, are made by the Superintendent Nursing Officer and Health Visitor of the district. Liaison with the hospital premature baby unit is extremely satisfactory, and no difficulty is experienced in obtaining the admission of cases, if the home conditions are unsatisfactory, for the special type of nursing required. The discharge of cases which have been admitted to hospital is notified to the appropriate Health Visitor.

SUPPLY OF DRIED MILK, ETC. :

In all the maternity and child welfare clinics administered by the Local Authority, National Dried Milk, Cod Liver Oil Compounds, Vitamin Tablets, Orange Juice, etc., are distributed by members of the Women's Voluntary Service. This function has been carried out in co-operation with the Ministry of Food. In addition, stocks of well known proprietary brands of dried milk and nutrients are sold at each centre.

DENTAL CARE :

Expectant mothers and young children requiring dental care, may be examined by the Local Authority's School Dental Officer at a weekly half-day session which he spends at the central clinic. Only inspections are made and advice given. No facilities are, at present, available for treatment. Patients who require treatment are referred to the general dental surgeon of their choice. The appropriate committees of the Local Authority have under consideration the appointment of an additional dental officer, so that an appreciable proportion of the combined time of the two dental officers can be devoted to the treatment as well as examination of the priority classes.

DOMICILIARY MIDWIFERY :

The Domiciliary Midwifery Service of the Local Health Authority is staffed by seven full-time midwives. They are under the constant supervision of the Superintendent Nursing Officer, who is designated as Non-Medical Supervisor of Midwives, and they are in constant contact with the Maternity and Child Welfare Medical Officer. Apart from their attendance at ante-natal clinics, on at least one occasion per fortnight, all midwives are required to report to the Superintendent Nursing Officer weekly.

The homes of all expectant mothers, who have decided to engage the services of a Domiciliary Midwife, are visited as soon as possible after the booking is effected. Home conditions are investigated, and, if these are deemed to be unsuitable, arrangements are made for the admission of the patient to hospital at the appropriate time. Several home visits are made during the course of pregnancy.

All members of the Midwifery staff of the Local Health Authority possess certificates of qualification for the administration of gas and air analgesia.

From time to time, members of the staff are authorised to attend refresher courses.

There are no facilities in the Borough for the training of Pupil Midwives, nor is there any hospital which offers Part II training, in the area.

Up to the present time, midwives who have been engaged to act as Maternity Nurses at confinements to be conducted by general practitioners, have not been requested to attend any ante-natal sessions held by them in their own consulting rooms.

HEALTH VISITING :

The staff of Health Visitors consists of eleven members. Ten of these are employed on combined duties in specific areas of the Borough allotted to them. They act as Tuberculosis Visitors, School Nurses and Supervisors of cases of Mental Defect. In their capacity as Tuberculosis Visitors, they have the opportunity of working in the chest clinic from time to time.

In recent years the extension of the work of the Health Visitors has been considerable, and they now carry out investigations into the home circumstances of the aged and chronic sick.

One Health Visitor devotes a considerable proportion of her time to the School Medical Service, and as a special duty she is made wholly responsible for contact tracing, in relation to the treatment of venereal diseases. She also visits the homes of patients who have defaulted in their attendance for treatment at the local Venereal Diseases Treatment Centre.

Although in recent years, members of the health visiting staff have not been authorised to attend refresher courses at distant centres, for financial reasons, their attendance at short courses organised locally has been encouraged.

HOME NURSING

Prior to the appointed day, a very efficient voluntary organisation—the Tynemouth District Nursing Association—had functioned in the Borough for many years. This Association obtained its funds principally from public donations and charitable bequests, and was in association with the Northumberland County Nursing Association.

The local association had a staff of four full-time and one part-time nurses. On the introduction of the Nurses' Salaries Scales, as recommended by the Rushcliffe Committee, it was necessary to obtain financial assistance from the Local Authority, in order to carry out the work efficiently, and perhaps it was inevitable that the staff and equipment were transferred en bloc to the Local Health Authority on 5th July, 1948.

Today, with a staff of eight full-time nurses working under the direction of the Superintendent Nursing Officer, the Home Nursing Service forms one of the most essential and human services ever to be engendered for the good of the community, as indeed it always has done.

As mentioned elsewhere in this survey, there is very close co-operation with the General Medical Practitioners. In the majority of cases, the engagement of the services of the District Nurses is the subject of a written request by a general practitioner. Written instructions are usually supplied by the general practitioner to the nurse, and message forms are left at the home of the patient as a convenient method for the interchange of information and instructions between doctor and nurse.

The classification and proportion of main types of cases attended during 1952 by the nurses are as follows :—

Carcinoma	68
Diabetes Mellitus	12
Hypodermic Injections (all types)	117
Gynaecological Conditions ...	69
Pneumonia	12
Puerperal Pyrexia	8
Surgical Dressings	131
Tuberculosis	12
Chronic Sick	302

There is no routine night service. A District Nurse only attends patients at night as and when required to do so.

All hospitals in the region are aware of the existence of the Home Nursing Service, and frequently Hospital Almoners notify the Superintendent Nursing Officer of the pending discharge of a patient from hospital, so that the services of a District Nurse may be available when the patient returns home, and articles such as bed pans, back rests, etc., may be supplied on loan under Section 28 of the 1946 Act.

There are no arrangements in operation in the Borough for the training of District Nurses. The Superintendent Nursing Officer is a Queen's Nurse and the usual membership fee is paid to the Queen's Institute of District Nursing by the Local Health Authority.

For economic reasons the Council has not made any provision for sending members of the District Nursing staff to attend refresher courses. An endeavour to arrange for periodical visits to local hospitals, in order to receive instruction on modern methods, is under consideration.

VACCINATION

The public are kept informed of the necessity for vaccination by Midwives, by routine visits of the Health Visitors to homes containing young children, and by direct postal reminders.

At the present time, all vaccinations are carried out by General Practitioners, and a fee of 5/- is paid in respect of completed record cards sent by them to the Public Health Department.

No arrangements have yet been made for holding vaccination sessions at maternity and child welfare centres or at the school clinic.

On grounds of economy no public advertising has been embarked upon.

The following table indicates the trend with regard to this prophylactic measure :—

<i>Years</i>	<i>Infants Vaccinated</i>	<i>Births</i>
1938	181	1,130
1939	172	1,189
1940	214	1,121
1941	199	887
1942	229	941
1943	309	1,160
1944	494	1,576
1945	509	1,565
1946	595	1,874
1947	729	1,433
	<hr/> 3,631 <hr/>	<hr/> 12,876 <hr/>

During the ten year period 1938/47, an annual average of 1,287 births showed an average of 363 infants vaccinated, or an annual average of 28. %

<i>Years</i>	<i>Infants Vaccinated</i>	<i>Births</i>
1948	99	1,291
1949	112	1,311
1950	198	1,174
1951	217	1,220
	<hr/> 626 <hr/>	<hr/> 4,996 <hr/>

IMMUNISATION — DIPHTHERIA

Although immunisation against diphtheria has been available in the Borough for many years, it was not until June, 1941, when the Ministry's campaign for immunisation against diphtheria was launched, that the service became organised effectively.

Regular immunisation clinics were set up at the maternity and child welfare centres and at the school clinic.

Mass immunisation has been carried out amongst school children on school premises, with the result that today 74% of the child population (children under 15 years of age) have been immunised against diphtheria.

Health Visitors play the major role in the continuance of this service at a satisfactory level. Advice given to mothers on this subject and personal calls made at the homes of young children maintain a steady attendance at maternity and child welfare centres for immunisation at about 11 months of age, and just before reaching school age for "boosting" doses.

No widespread publicity has been undertaken, but, in addition to the personal efforts of the Health Visitors and the advice and information gleaned by the mothers on their routine visits to the maternity and child welfare centres, attractive first birthday greeting cards, obtained from the Central Council for Health Education, are sent out by post to the mothers of children about to reach 12 months of age, reminding them of the necessity of safeguarding their children against diphtheria. This has proved to be a highly successful propaganda medium.

General Practitioners also take part in this service on identical lines to that which apply to vaccination against smallpox.

IMMUNISATION — WHOOPING COUGH

No specific arrangements have been made for the regular immunisation against whooping cough, *per se*, but a general practitioner may carry out a combined immunisation against whooping cough and diphtheria and receive a fee as if immunisation had been carried out against the latter only.

AMBULANCE SERVICE

GENERAL :

The Ambulance Service is operated concurrently with the Fire Brigade of the Local Authority, and the responsibility for its routine direction has been delegated to the Chief Fire Officer who is also designated Ambulance Officer.

The vehicular establishment at the end of the year 1952, was seven ambulances and two sitting-case cars.

The employment of eighteen firemen in excess of actual requirements, has been authorised so that drivers and attendants are available without interference in any way with the fire fighting force.

During the year 1952, the incidence of calls on the Ambulance Service showed an increase of 3,081 (approximately 20%) over the previous year, a total of 17,461 of all types having been answered, compared with 14,380 in 1951.

Mileages covered were 92,249 in 1952, as against 90,941 in 1951, the comparatively low increase of 1,307 miles (approximately 14%) being accounted for by the fact that the greatest increase in demands was for the conveyance of local residents to and from hospitals in the Borough, and that more effective arrangements had been made with local hospitals as to the notification of impending discharges.

Details of the increased numbers of calls received are as follows :—

Residents conveyed to or from Tynemouth hospitals	...	1,735
Residents conveyed to outside hospitals	... ..	399
Residents conveyed from outside hospitals	... ..	861
Accidents to residents	... ..	2
Non-residents conveyed between Tynemouth hospitals	...	400
Non-residents conveyed home from Tynemouth hospitals	...	10
Journeys conveying blood plasma	... ..	1
Journeys conveying midwives	... ..	11
Abortive calls	... ..	62
		<hr/>
		3,481
		<hr/>

Fewer calls were received in the following categories :—

Residents conveyed between Tynemouth hospitals	...	335
Accidents to non-residents	... ..	11
Miscellaneous cases	... ..	54
		<hr/>
		400
		<hr/>
Net Increase	... ..	3,081
		<hr/>

From the above figures it would appear that more and more patients are being referred to hospitals for treatment, in addition to which the public is becoming more “ambulance-conscious.”

In February, 1952, a second sitting-case car approved in the establishment scheme, was put into service and more accurate figures as to the calls for car conveyance as compared with ambulances are naturally reflected in the figures for 1952.

In comparison with 1951 when one car only was in use (other sitting patients being conveyed by ambulance), car journeys made in 1952 show an increase of nearly 1,200 and the number of patients carried by car increased by nearly 2,200.

Ambulance journeys on the other hand decreased by over 400, in spite of the extra cases conveyed (800 approximately).

SPECIAL ARRANGEMENTS : MUTUAL AID :

Since late in 1950 an arrangement has been in force between Northumberland County Council and the County Borough of Tynemouth Council, whereby, with certain minor and negligible exceptions, each Authority carries out the conveyance of its residents regardless of the primary responsibility.

Thus, Northumberland County vehicles convey all persons resident in the County from all the Tynemouth hospitals, either to their homes, or elsewhere; whilst Tynemouth vehicles perform like services for Borough residents from all hospitals normally served by the County Service.

In practice this arrangement works well and enables both Authorities to reduce the number of journeys.

It has not been found necessary to attempt to make such arrangements with other Local Authorities, except in the case of the City of Newcastle. That Local Health Authority rigidly observes the provisions of the principal and amending Acts, as to its liability for the conveyance of patients discharged from Newcastle hospitals. As a result of this decision, Tynemouth vehicles run without passengers over considerable mileages, adding to the cost of conveying patients, to which must be added the charges made by the City of Newcastle on account of journeys undertaken in conveying residents of Tynemouth from Newcastle hospitals to their own area.

DISCHARGES FROM LOCAL HOSPITALS :

By arrangement with the South East Northumberland Hospital Management Committee, the Ambulance Service is notified daily of all impending discharges of in-patients from Tynemouth hospitals, one day in advance. These cases are then classified according to destination and other calls already booked. Hospitals are then advised of the times determined for the removal of each case so that their arrangements may be facilitated.

This system has been found to be effective as it enables the major part of a day's work to be planned in advance, and eliminates last minute adjustments which always tend to upset the running of the Service and to cause vehicles to arrive late.

ARRANGEMENTS TO PREVENT ABUSES :

Each local hospital and all members of the medical profession have been approached, from time to time, to attempt to ensure that all calls made for conveyances are in fact supported by necessity.

In some few cases, investigation has been made into suspected cases of abuse, in an endeavour to eliminate unnecessary journeys.

Every case calling for the conveyance of a patient out of the Region is investigated to ensure that it is absolutely necessary and that no suitable alternative exists.

It is not thought that abuse of the Service exists to any great extent, but constant vigilance is maintained.

SPECIAL SERVICES :

In addition to normal ambulance work it has been found convenient to undertake certain other duties, on request, such as the conveyance of Midwives and their equipment, after public transport has ceased to run, or at peak hours, and of blood plasma and other medical supplies to hospitals.

These services do not affect the normal work of the service, as such calls usually arise during the quiet periods of the twenty-hour hours.

DIFFICULTIES :

The outstanding difficulty encountered, in the operation of the Ambulance Service, is the provision of a fleet large enough to satisfy all needs at peak periods, but which will not be unnecessarily expensive by virtue of being in excess of average requirements.

As a result of the centralisation of treatment of certain ailments at specific hospitals, and of the distances involved in conveying patients to them, it is often found that one, two or even three vehicles are engaged during the whole morning conveying and returning single patients, and in certain instances a whole day may be occupied on this type of duty.

This aspect is more evident when patients are conveyed out of the region, it being not uncommon for a vehicle to be absent from the general Service for periods of from twenty-four to forty-eight hours. These cases, whilst few in number, do disrupt the routine administration of the service.

Another difficulty is caused by the varying times at which patients are called to hospitals for treatment. This leads to demands for conveyances which cannot be met just at the times set. Compromise has therefore to be adopted, which means that patients may have to be conveyed to hospital half-an-hour or so before the appointed time.

Recurrent treatment cases, too, cause great pressure on the Service when the days upon which they attend hospital coincide, owing to the varying periods between treatment. On every day of the week, there is a nucleus of such cases which attends regularly week by week on the same day of the week ; but, added to these are the patients who attend every second day and every third day. The days on which these patients go to hospital necessarily change week by week and cause congestion on the days when they coincide, other days being comparatively quiet. There is nothing which can be done to ease the strain on the heavy days, as they do not occur on the same days each week.

NEW EQUIPMENT :

Other than resuscitation apparatus and emergency maternity packs, no new types of equipment have been provided, as it has not been found necessary in view of the limited area covered by the service, as a result of the appreciable number of hospitals concentrated in the Borough and surrounding districts.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

TUBERCULOSIS :

A Tuberculosis After-Care Sub-Committee has been in existence in the Borough for many years, but since July, 1948, very few meetings have been convened because the number of applications for assistance from tuberculous persons has been negligible. The needs of most have been satisfied on application being made to the local office of the National Assistance Board.

On a few occasions, the Committee of the former Tynemouth District Nursing Association has assisted patients from endowment funds which were not transferred to the Local Authority on the appointed day.

Ten per cent. of all new houses built by the Local Authority are earmarked for the purpose of rehousing families containing one or more cases of open pulmonary tuberculosis, and there is a constant waiting list for this concession. The full economic rent is paid by these families.

Educational correspondence courses have, at the request of the Public Health Department, been arranged by the Local Education Authority for T.B. cases in sanatoria and grants have been paid where appropriate.

The Tuberculosis Visiting and Health Visiting Services are now merged and visits to the homes of tuberculous families are undertaken by the Health Visitor for the district.

In April, 1952, a scheme for the B.C.G. Vaccination of contacts of cases of tuberculosis was commenced. An initial survey of all contacts of cases attending the chest clinic was carried out with the assistance of the Health Visitors, and at the end of 1952, sixty-six contacts had been vaccinated.

Convalescent Home treatment has been arranged for periods of up to four weeks in certain cases on the recommendation of the Chest Physician, and in cases where it was necessary that segregation should be effected between the infected case and the contact during B.C.G. Vaccination of the latter.

As the Public Health Department and the Chest Clinic are at the present time housed in the same building, close co-operation is maintained by their respective staffs, particularly in connection with the interchange of information and accessibility of records kept by both bodies.

OTHER TYPES OF ILLNESS :

A great deal of domiciliary work is carried out by the eight District Nurses, under the guidance of the Superintendent Nursing Officer, and details of this work will be found in that section of the survey relating to Home Nursing.

Many cases of aged and infirm persons have their burden lightened by services rendered by the local Women's Voluntary Service, Duly Authorised Officers, Welfare Department staff, and others interested in the care of old people.

One Health Visitor spends a considerable part of her time tracing venereal diseases contacts, and here again the close proximity of the Public Health Department premises with the local hospital at which treatment is carried out, promotes close co-operation between tracer and clinic.

NURSING EQUIPMENT :

Many articles of nursing equipment are lent out to patients, free of charge, on the written recommendation of the Family Doctor. Such articles as invalid chairs, bed rests, waterproof sheets, bed pans, urinals, crutches, air rings, etc., are freely circulated.

DOMESTIC HELP

The local Home and Domestic Help Scheme came into operation in December, 1948, in accordance with the proposals approved by the Minister under Section 20(3) of the 1946 Act.

The following figures illustrate the scope of this work during the past few years :—

<i>Year</i>	<i>Confinements</i>	<i>Aged, Infirm and Others</i>
1949	12	19
1950	14	58
1951	31	61
1952	21	68

The scheme was originally intended to serve the emergency needs of expectant and nursing mothers primarily, but figures show that since its inception help has been applied for, and granted, in the following proportions :—

Confinements : 40%. Aged, Infirm and Others : 60%.

The service is directed by the Superintendent Nursing Officer, with assistance from Health Visitors and clerical staff.

An average of four to six part-time helpers are employed and their wages and conditions of service are in accordance with the Agreements of the Northern Provincial Council.

No retaining fees are paid to helpers.

The Home Help provides her own food and no subsistence allowance for meals is granted. Out-of-pocket travelling expenses are re-imbursed.

Each Home Help is supplied with a stencilled list of her duties. One important direction is that she must not undertake the duties of a Midwife or a Maternity Nurse, or interfere in any way with the instructions of a Doctor or Midwife.

Charges for the service are assessed in accordance with the scale of the Metropolitan Boroughs Standing Joint Committee.

Help is limited to a maximum period of two weeks, but this period can be extended at the discretion of the Medical Officer of Health in exceptional cases. The service is considered to be used for the purpose of tiding a household over an emergency and is not intended to provide subsidised permanent domestic assistance.

The homes of all applicants are first visited by a Health Visitor to ascertain the genuine need for help. Details of the family income are obtained if the applicant is not willing to pay the full recovery charge and a charge is then made on assessment.

No facilities have been arranged either for the training of administrative staff or helpers.

HEALTH EDUCATION

For economic reasons, no regular or constant scheme for health propaganda has been launched.

Health Visitors give talks to mothers at the routine maternity and child welfare centres, and at the parents' homes.

A diagrammatic health services exhibition was held in the local Drill Hall in 1949, in connection with the centenary celebrations of the County Borough of Tynemouth. This exhibition was visited by many thousands of local residents.

In 1950, an exhibition stand, supplied by the Central Council for Health Education, was displayed for many weeks at local cinemas. Various local health services were widely publicised in this way.

No action has yet been taken with regard to propaganda on the question of accidents in the home.

MENTAL HEALTH

ADMINISTRATION :

The administration of the Mental Health Services of the Borough is carried out by the Mental Health Sub-Committee, which meets monthly and consists of eight members of the Health Committee and five co-opted members elected annually by the Health Committee, such appointments not being subject to confirmation by the Council. The Committee considers, and reports to the Health Committee, all matters connected with Lunacy and Mental Deficiency, with the exception of certain functions under the Lunacy Acts which are discharged by the Welfare Committee.

The staff employed in the Mental Health Service consists of the Medical Officer of Health and his Assistant ; four General Practitioners for the purposes of the Mental Deficiency Acts ; ten Health Visitors on a part-time basis yielding the equivalent of the time of one full-time Mental Welfare Investigation Officer previously employed to execute similar duties ; three Duly Authorised Officers for the purpose of the Lunacy and Mental Treatment Acts, who are members of the clerical staff of the Public Health Department and whose duties in this respect are, of course, of a part-time character, and three Mental Deficiency Duly Authorised Officers, for the purposes of the Mental Deficiency Acts, who are the Town Clerk, his Deputy and his Chief Clerk. There are no Psychiatric Social Workers, Occupation Centre Supervisors, etc.

CARE AND AFTER-CARE :

Except for supervisory visits made by Health Visitors, no after-care work is undertaken by the Local Health Authority, either amongst the mentally defective or the mentally deranged.

A limited amount of after-care work was previously undertaken by the Northern Branch of the National Association for Mental Health, but this service has now been withdrawn by the Association.

CO-ORDINATION WITH THE REGIONAL HOSPITAL BOARD AND HOSPITAL MANAGEMENT COMMITTEE :

G. McCoull, Esq., O.B.E., V.R.D., M.D., Q.H.P., Consultant in Mental Deficiency and Medical Superintendent to Prudhoe and Monkton Mental Deficiency Hospital, conducts a Mental Deficiency Clinic at the Tynemouth Public Health Department.

Patients residing in Tynemouth County Borough, who are on licence from Prudhoe and Monkton Hospital, are supervised by the Hospital's Welfare Officer.

DUTIES DELEGATED TO VOLUNTARY ASSOCIATIONS :

No duties under this Section are delegated to Voluntary Associations.

ARRANGEMENTS FOR THE TRAINING OF STAFF :

No arrangements have been initiated for the training of staff. One Duly Authorised Officer has attended a week-end refresher course.

WORK UNDERTAKEN IN THE COMMUNITY :

No arrangements are at present in operation under Section 28 for the Prevention of Mental Illness, care and After-Care of the Mentally Ill, except in the case of the supervision of mentally defective persons.

WORK UNDERTAKEN BY DULY AUTHORISED OFFICERS (LUNACY AND MENTAL TREATMENT ACTS).

During 1952, the total number of cases dealt with was 100. Out of this total, 77 cases were admitted directly to Preston Hospital under Section 20 Procedure, 1 was admitted directly to St. George's Mental Hospital as a voluntary patient, 5 as certified patients, and in 17 cases no action was taken under the Lunacy Acts.

Of the 77 cases admitted to Preston Hospital, 38 were certified by the medical staff of that hospital and transferred therefrom to St. George's Mental Hospital, 26 were discharged home, 6 were transferred to Part III Accommodation (National Assistance Act, 1948), 1 was retained as a hospital patient, 3 entered St. George's Mental Hospital as voluntary patients and 1 died in hospital. Two were discharged to other hospitals.

The work of the Duly Authorised Officers is made unduly onerous owing to the lack of hospital beds for the aged and infirm. It is a matter for regret that frequently the only method at present of obtaining hospital admission for cases of senile dementia is by action under the Lunacy Acts.

ARRANGEMENTS FOR THE ASCERTAINMENT AND SUPERVISION OF MENTAL DEFECTIVES.

The most effective method of ascertaining mental deficiency is through the medium of the School Medical Service. At the present time, the Assistant Medical Officer of Health spends a considerable amount of time at the school clinic, ascertaining mental deficiency in school children. Some cases are ascertained after a period of observation at the Special School. They are eventually reported by the Local Education Authority under Section 57 of the Education Act, 1944, to the Local Mental Health Authority in the person of the Medical Officer of Health.

A few cases are reported to the latter Authority by General Practitioners. All cases so reported are seen by a Consultant in Mental Deficiency for specialist diagnosis.

The number of mental defectives awaiting admission to hospital at the end of the year was 26. During the year 8 cases were ascertained as "subject to be dealt with", and 1 case was found not "subject to be dealt with".

GUARDIANSHIP

There is only one case of mental deficiency under guardianship in the Borough and this is dealt with by annual visit by the patient's own Doctor and by routine visits by a Health Visitor, in accordance with the requirements of the Mental Deficiency Regulations, 1948.

ARRANGEMENTS FOR OCCUPATION AND TRAINING FOR DEFECTIVES :

No such arrangements exist, on the grounds that there are insufficient mentally defective persons in the Borough of a type likely to benefit by such a scheme.

An abortive attempt was made to secure places for two or three Tynemouth cases in the Northumberland County Council's Occupation Centre at Wallsend.

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